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| Fill in this information to identify your case: | | |
|--|--|-------------------------------------|
| United States Bankruptcy Court for the: Northern District Of Illinois | | |
| Case number (If known): | Chapter you are filing under: ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 | ☐ Check if this is a amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filling alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| P | art 1: Identify Yourself | | |
|----|---|--------------------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Louis First name Charles Middle name | Sherry First name Coleen Middle name |
| | Bring your picture identification to your meeting with the trustee. | Gutierrez Last name | Gutierrez Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | First name | First name |
| | Include your married or maiden names. | Middle name | Míddle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3, | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx - xx - 0 7 4 1 OR 9 xx - xx | xxx - xx - 1 8 1 9 OR 9 xx - xx |

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| De | btor 1 Louis Charles Gutie | | | Case number (if known) | |
|--------------|--|---|---|---|---|
| | First Name Middle Na | me Last Name | | | |
| r Principles | | About Debtor 1: | | About Debtor 2 (Spouse | Only in a Joint Case): |
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in | ☑ I have not used any busine | ess names or EINs. | ☑ I have not used any bus | siness names or EINs. |
| | the last 8 years | Business name | | Business name | |
| | Include trade names and doing business as names | Business name | | Business name | |
| | | EIN | | EIN = | |
| | | EIN | | EIN | -, |
| 5. | Where you live | | er man er | If Debtor 2 lives at a diffe | rent address: |
| | | 219 Prairie Ridge, Dr. | | | |
| | | Number Street | | Number Street | |
| | | | | | |
| | | Minooka | IL 60447 | | |
| | | City | State ZIP Code | City | State ZIP Code |
| | | Grundy | | Courbi | |
| | | County | | County | |
| | | If your mailing address is di above, fill it in here. Note tha any notices to you at this maili | it the court will send | if Debtor 2's mailing addi yours, fill it in here. Note any notices to this mailing | that the court will send |
| | | Number Street | | Number Street | |
| | | P.O. Box | | P.O. Box | |
| | | City | State ZIP Code | City | State ZIP Code |
| 6. | Why you are choosing | Check one: | ikkelitation in Assachers in Amerika Assacher in the Assacher in Assacher in Assacher in Assacher in Assacher | Check one: | <u>na ann an tagailtí a chlia saide saide saide saide an tagailtí a sa rios a can</u> n 1609 a 1679 de 1679 agus ann am |
| | this district to file for bankruptcy | Over the last 180 days bef I have lived in this district to other district. | | Over the last 180 days I have lived in this distri other district. | |
| | | I have another reason. Exp (See 28 U.S.C. § 1408.) | olain. | ☐ I have another reason. (See 28 U.S.C. § 1408 | |
| | | | | | |
| | | | | | |
| | | | | | |

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Louis Charles Gutierrez Case number (if known) Debtor 1 Middle Name First Name Tell the Court About Your Bankruptcy Case Part 2: Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing 7. The chapter of the for Bankruptcy (Form B2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under Chapter 11 Chapter 12 Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your 8. How you will pay the fee local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for ☐ No bankruptcy within the Case number 09-24337 07/03/2009 Yes. District Northern District of Illinois When last 8 years? MM / DD / YYYY District Case number _ MM / DD / YYYY 10. Are any bankruptcy ☑ No cases pending or being Yes. Debtor _ Relationship to you filed by a spouse who is not filing this case with When Case number, if known you, or by a business MM / DD / YYYY partner, or by an affiliate? Relationship to you Case number, if known_ District MM / DD / YYYY 11. Do you rent your ⊠ No. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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| otor 1 | Louis Charles Gutier | | | | Case number (if known) | <u>, , , , , , , , , , , , , , , , , , , </u> | |
|----------------|---|--------------------------------|--|---|--------------------------|--|---|
| | First Name Middle Nam | e Lasti | lame | | · • | | |
| | | | | | | | |
| t 3: | Report About Any E | usinesses Y | ou Own as a S | Sole Proprietor | | | |
| A wa | au a aala muanulatan | [70] | | | | | |
| | ou a sole proprietor / full- or part-time | No. Go to | Part 4. | | | | |
| busin | | ☐ Yes. Nam | e and location of | business | | | |
| A soie | proprietorship is a ss you operate as an | | | | | | |
| individu | ual, and is not a | Name | of business, if any | | | | _ |
| | te legal entity such as oration, partnership, or | *** | | | | | _ |
| LC. | | Numb | er Street | | | | |
| | nave more than one oprietorship, use a | | | | | | |
| separa | te sheet and attach it petition. | | | | | | |
| n trus t | petition. | City | | | State | ZIP Code | _ |
| | | Che | k the annronriate | e box to describe you | r husiness: | | |
| | | | | - | 1 U.S.C. § 101(27A)) | | |
| | | | | | n 11 U.S.C. § 101(51B)) | 1 | |
| | | _ | | efined in 11 U.S.C. § | - ' '' | | |
| | | | | r (as defined in 11 U. | . , ,, | | |
| | | | lone of the above | | | | |
| | PINTAPHI MPN. MALM. JAHA. I | | | | | PERSONAL SERVICES AND SERVICES | |
| Chapt Bankr | ou filing under er 11 of the ruptcy Code and ou a small business r? | most recent be any of these of | priate deadlines. alance sheet, sta locuments do not | If you indicate that y stement of operations t exist, follow the pro- | ou are a small business | small business debtor so that s debtor, you must attach you and federal income tax return 116(1)(B). | r |
| | efinition of <i>small</i> | ☑ No. Iam | not filing under C | hapter 11. | | | |
| | ss <i>debtor</i> , see .C. § 101(51D). | ☐ No. I am the E | filing under Chap ankruptcy Code. | ter 11, but I am NOT | f a small business debto | or according to the definition is | n |
| | | Yes. I am Bank | filing under Chap ruptcy Code. | ter 11 and I am a sm | nall business debtor acc | ording to the definition in the | |
| | | | | | | | |
| t 4: | Report if You Own | r Have Any | Hazardous Pro | perty or Any Pro | perty That Needs I | mmediate Attention | |
| | | | | | | | |
| | u own or have any rty that poses or is | ⊠ No | | | | | |
| | d to pose a threat | ☐ Yes. Wh | at is the hazard? | | | | |
| | ninent and Table hazard to | | | | | | |
| | health or safety? | | | | | | |
| Or do | you own any | | | | | | |
| | rty that needs diate attention? | If in | mediate attentior | n is needed, why is it | t needed? | | |
| or exa | mple, do you own | | | | | | |
| hat mu | ble goods, or livestock ist be fed, or a building eds urgent repairs? | | | | | - Little Control of the Control of t | |
| | • | Wh | ere is the property | y? | | | |
| | | | , ,, | | treet | | |
| | | | | | | | |
| | | | | | | | |
| | | | | City | | State ZIP Code | |
| | | | | | | | |

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| Debto | r 1 |
|-------|-----|
| | |

Louis Charles Gutierrez

First Name Middle Name

Last Name

| Case number (if known) | |
|------------------------|--|
|------------------------|--|

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About I | Debtor | 1 |
|---------|--------|---|
|---------|--------|---|

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required | to | receive | а | briefing | about |
|-------------------|----|----------|-----|----------|-------|
| credit counseling | þe | ecause o | of: | | |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before ! filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| De | btor 1 Louis Charles Gutier | | Case number (if kn | กษณ์ | |
|---------------|--|--|--|--|--|
| | First Name Middle Nam | ne Last Name | | | |
| | | | | | |
| | | | | | |
| L | art 6: Answer These Que | stions for Reporting Purpos | es | | |
| 16 | . What kind of debts do you have? | 16a. Are your debts primar as "incurred by an individu | rily consumer debts? Consumer debts? Consumer debts? al primarily for a personal, family, or hou | ofs are defined in 11 U.S.C. § 101(8) sehold purpose." | |
| | you have? | □ No. Go to line 16b.☑ Yes. Go to line 17. | | | |
| | | 16b. Are your debts primar money for a business or in | rily business debts? Business debts vestment or through the operation of the | are debts that you incurred to obtain business or investment. | |
| | | ☐ No. Go to line 16c. ☐ Yes. Go to line 17. | | | |
| | | 16c. State the type of debte you | Lowe that are not consumer debte as bu | | |
| | | | owe that are not consumer debts or but | siness debts. | |
| 17. | Are you filing under Chapter 7? | ☑ No. I am not filing under Ch | napter 7. Go to line 18. | and the second s | |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | administrative expense | er 7. Do you estimate that after any exer s are paid that funds will be available to | npt property is excluded and distribute to unsecured creditors? | |
| Avecasso | | | | | |
| 18. | How many creditors do you estimate that you owe? | ✓ 1-49✓ 50-99✓ 100-199 | 1,000-5,000 5,001-10,000 | 25,001-50,000 50,001-100,000 | |
| lansumans | | 200-999 | 10,001-25,000 | ☐ More than 100,000 | |
| 19. | How much do you estimate your assets to | \$0-\$50,000 \$50,001-\$100,000 | ☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion | |
| i melendospoj | be worth? | | ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million | ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion | |
| 20. | How much do you estimate your liabilities | \$0-\$50,000 \$50,001-\$100,000 | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million | □ \$500,000,001-\$1 billion □ \$1,000,000,001-\$10 billion | |
| | to be? | ☒ \$100,001-\$500,000 | \$50,000,001-\$100 million | ☐ \$10,000,000,001-\$50 billion | |
| : | | ☐ \$500,001-\$1 million | ☐ \$100,000,001-\$500 million | ☐ More than \$50 billion | |
| Pa | rt 7: Sign Below | | | | |
| Fo | r you | I have examined this petition, an correct. | d I declare under penalty of perjury that | the information provided is true and | |
| | | If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7. | apter 7, I am aware that I may proceed, i understand the relief available under ea | if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed | |
| | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | | I request relief in accordance wit | h the chapter of title 11, United States C | ode, specified in this petition. | |
| | | I understand making a false state with a bankruptcy case can resul 18 U.S.C. §§ 152, 1341, 1519, a | It in fines up to \$250,000, or imprisonme | money or property by fraud in connection and for up to 20 years, or both. | |
| | | Louis Charles Gutierrez Signature of Debtor 1 | | coleen Gutierrez | |
| | | Executed on 10/04/2017 MM / DD / Y | Executed | I on 10/04/2017 MM / DD / YYYY | |

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| ebtor 1 | Louis Charles Gutierr | ez Case number (if known) | | |
|----------------------|--|--|--|--|
| CDIOI 1 | First Name Middle Nam | | | |
| epresen f you are | attorney, if you are ted by one e not represented orney, you do not | I, the attorney for the debtor(s) named in this pet to proceed under Chapter 7, 11, 12, or 13 of title available under each chapter for which the perso the notice required by 11 U.S.C. § 342(b) and, in knowledge after an inquiry that the information in | 11, United States Code, and in is eligible. I also certify the a case in which § 707(b)(4) | l have explained the relief at I have delivered to the debtor(s Ɗ) applies, certify that I have no |
| | ile this page. | ✗ /s/ James M. Durkee | Date | 10/04/2017 |
| | | Signature of Attorney for Debtor | | MM / DD /YYYY |
| | | James M. Durkee Printed name Malmquist, Geiger and Durkee, LLC Firm name 415 Liberty St. Number Street | | |
| | | Morris City | IL State | 60450 ZIP Code |
| | | Contact phone (815) 942-5072 | Email address | jimdurkee@mglawoffices.com |
| | | 6296297 | IL . | |
| | | Bar number | State | |

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| Debtor 1 | Louis | Charles | Gutierrez | |
|---------------------|------------------|-----------------------|-------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Sherry | Coleen | Gutierrez | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court | for the: Northern Dis | trict of Illinois | |

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Describe Lacii Residence, Dunding, | Land, or Other Real Estate You Own or Ha | ve an Interest In | | |
|--|---|--|--|--|--|
| | | st in any residence, building, land, or similar prop | erty? | | |
| | o. Go to Part 2, es. Where is the property? | | | | |
| 1.1. | 219 Prairie Ridge Dr. Street address, if available, or other description | What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative | Do not deduct secured cla the amount of any secure Creditors Who Have Clair | d claims on Schedule D: ns Secured by Property. | |
| | | ☐ Manufactured or mobile home | Current value of the entire property? | Current value of the portion you own? | |
| | | Land | \$ <u>167,375.00</u> | \$ <u>167,375.00</u> | |
| | Minooka IL 60447 City State ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by | |
| | Grundy County | Who has an interest in the property? Check one. | Fee Simple Owner | shin | |
| | | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is co | | |
| | | Other information you wish to add about this it property identification number: | em, such as local | | |
| 12 | own or have more than one, list here: Street address, if available, or other description | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | | |
| | ouest address, if available, of other description | ☐ Condominium or cooperative☐ Manufactured or mobile home | Current value of the entire property? | | |
| | | Land | \$ | \$ | |
| | City State ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by | |
| | | Who has an interest in the property? Check one. | | | |
| | County | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is con (see instructions) | mmunity property | |
| | | Other information you wish to add about this ite property identification number: | m, such as local | | |

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| | Louis Cha First Name Middle | arles Name | Gutierr Last Name | Case number (#k | anown) | |
|--|--|--|----------------------|--|---|---|
| 1.3. | Street address, if available | e, or other desc | cription | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land | Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the entire property? | i claims on Schedule D: |
| | City | State | ZIP Code | ☐ Investment property ☐ Timeshare ☐ Other | Describe the nature of interest (such as fee the entireties, or a life | simple, tenancy by |
| | County | | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite | Check if this is co | mmunity property |
| 2 Add 1 | he dollar value of the | oortion vou | own for al | property identification number: of your entries from Part 1, including any entrie | es for pages | \$167,375.00 |
| you h | nave attached for Part | 1. Write tha | t number h | ere. | → | |
| Part 2: | Describe Your | /ehicles | | | | |
| Do you you own | own, lease, or have leg that someone else drive , vans, trucks, tractors | gal or equita es. If you lea | ise a vehicle | at in any vehicles, whether they are registered or e, also report it on Schedule G: Executory Contracts , motorcycles | not? Include any vehicle and Unexpired Leases. | s |
| Do you you own 3. Cars | own, lease, or have leg that someone else drive , vans, trucks, tractors lo 'es Make: | gal or equita es. If you lea , sport utilit Cadillac | se a vehicle | e, also report it on Schedule G: Executory Contracts | and Unexpired Leases. Do not deduct secured of the amount of any secure Creditors Who Have Clai | aims or exemptions. Put ed claims on <i>Schedule D:</i> <i>ms Secured by Property.</i> |
| Do you you own 3. Cars \[\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | own, lease, or have leg that someone else drive, vans, trucks, tractors lo res Make: Model: Year: Approximate mileage: | gal or equitates. If you lead to sport utilities and the control of the control o | se a vehicle | e, also report it on Schedule G: Executory Contracts , motorcycles Who has an interest in the property? Check one. | e and Unexpired Leases. Do not deduct secured of the amount of any secure | aims or exemptions. Put ed claims on <i>Schedule D</i> : ms Secured by Property. |
| Do you you own 3. Cars \[\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | own, lease, or have leg that someone else drive , vans, trucks, tractors lo 'es Make: Model: Year: | gal or equitates. If you lead to sport utilities and the control of the control o | se a vehicle | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair | aims or exemptions. Put ad claims on <i>Schedule D</i> ims Secured by Property. Current value of the |
| Do you you own 3. Cars \(\sum \) \(\sum \) \(\sum \) 3.1. | own, lease, or have leg that someone else drive, vans, trucks, tractors lo res Make: Model: Year: Approximate mileage: | gal or equita es. If you lead s, sport utilit Cadillace SRX 2013 45000 | se a vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | aims or exemptions. Put ed claims on <i>Schedule D:</i> ms Secured by Property. Current value of the portion you own? |
| Do you you own 3. Cars \(\sum \) \(\sum \) \(\sum \) 3.1. | own, lease, or have leg that someone else driver, vans, trucks, tractors lowers. Make: Model: Year: Approximate mileage: Other information: | gal or equita es. If you lead s, sport utilit Cadillace SRX 2013 45000 | se a vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 14,982.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Creditors Who Have Clair Creditors Who Have Clair Carefillors Carefillo | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 14,982.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| Do you you own 3. Cars \(\begin{array}{c} \ \ \ \ \ \ \ \ \end{array} 3.1. | own, lease, or have leg that someone else drive, vans, trucks, tractors lo res Make: Model: Year: Approximate mileage: Other information: | cadillace SRX 2013 45000 | se a vehicles | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 14,982.00 | aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$ 14,982.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |

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Louis Charles Gutierrez Debtor 1 Case number (if known) First Name Middle Name Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories No ☐ Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 14,982.00 you have attached for Part 2. Write that number here

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Debtor 1

Louis First Name Charles

Gutierrez

| De | VOILOWN OF have any le | gal or equitable interest in any of the following items? | Current value of the portion you own? |
|------------|---|--|---|
| D (| you own or have any le | gai of equitable interest in any of the following terms. | Do not deduct secured claims or exemptions. |
| 6. | Household goods and i | furnishings | |
| | Examples: Major applian | ces, furniture, linens, china, kitchenware | |
| | No Yes. Describe | Household goods for a family of 3 (including living room and bedroom furniture, basement furniture, kitchen ware and pots and pans; Books; Household office goods/computer/printer | \$ <u>1,300.00</u> |
| 7. | Electronics | | |
| | collections; e | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games | |
| | ⊠ No | | |
| | Yes. Describe | | \$ |
| 8. | Collectibles of value | | |
| | stamp, coin, | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles | |
| | No Yes. Describe | | \$ |
| 9. | Equipment for sports a | nd hobbies | - |
| - | Examples: Sports, photo and kayaks; | ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments | |
| | ⊠ No | | ٦. |
| | Yes. Describe | | \$ |
| 10 | Examples: Pistols, rifles, X No | shotguns, ammunition, and related equipment | _ |
| | Yes. Describe | | \$ |
| 11 | | thes, furs, leather coats, designer wear, shoes, accessories | |
| | No X Yes, Describe | Personal clothes for a family of 3 | \$ <u>500.00</u> |
| | | | • |
| 12 | gold, silver | velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | No Yes, Describe | Personal jewelry | \$2,000.00 |
| 13 | B. Non-farm animals Examples: Dogs, cats, b | pirds, horses | |
| | ☑ No ☐ Yes, Describe | | \$ |
| 14 | 4. Any other personal an | d household items you did not already list, including any health aids you did not list | _ . 1 |
| | ĭ No | | _ |
| | Yes. Give specific information | | \$ |
| 15 | 5. Add the dollar value o | f all of your entries from Part 3, including any entries for pages you have attached | \$3,800.00 |
| | for Dari 2 Wirles that a | umber here | I |

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Debtor 1

Louis First Name

Charles Middle Name

Gutierrez Last Name

| Do you own or have any | legal or equitable interest in | any of the following? | Current value of the portion you own? Do not deduct secured claim or exemptions. |
|--|--|---|---|
| 16. Cash Examples: Money you | have in your wallet, in your hon | ne, in a safe deposit box, and on hand when you file your petition | |
| ☑ No | | | |
| ☐ Yes | | Cash: | \$ |
| 17. Deposits of money Examples: Checking, s and other si | avings, or other financial accou imilar institutions. If you have m | unts; certificates of deposit; shares in credit unions, brokerage houses utliple accounts with the same institution, list each. | , |
| ☐ No | | | |
| X Yes | | Institution name: | |
| | 17.1. Checking account: | PNC Bank | \$500.00 |
| | 17.2. Checking account: | | \$ |
| | 17.3. Savings account; | PNC Bank | <u>\$16.00</u> |
| | 17.4. Savings account: | | \$ |
| | 17.5. Certificates of deposit: | | \$ |
| | 17.6. Other financial account: | | \$ |
| | 17.7. Other financial account: | | \$ |
| | 17.8. Other financial account: | | \$ |
| | 17.9. Other financial account: | | \$ |
| | | | |
| • | or publicly traded stocks | erage firms, money market accounts | |
| □ No | The strict accounts with blow | crage mins, money market accounts | |
| | Institution or issuer name: | | |
| | Ameritrade | | \$ <u>104.45</u> |
| | | | - \$ |
| | | | - \$ |
| | | | |
| | tock and interests in incorpo and joint venture | rated and unincorporated businesses, including an interest in | |
| an LLC, parmership, a | Name of entity: | % of ownership: | |
| No No | rianii or oriaty. | | |
| No Yes. Give specific Yes. Give specific No No | | % | \$ |
| ⊠ No | | | \$ \$ |

Case number (if known)

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| Negotiable instruments it Non-negotiable instrume | nclude personal chec nts are those you ca | cks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them. | |
|---|--|--|------------------------------|
| X No☐ Yes. Give specific information about | Issuer name: | | \$ |
| them | | | \$ |
| | | | \$ |
| | | | |
| Retirement or pension Examples: Interests in IF | accounts RA, ERISA, Keogh, 4 | 01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| ☑ No | | | |
| Yes. List each account separately | Type of account: | Institution name: | |
| | 401(k) or similar plan: | | \$ |
| | ,, | | \$ |
| | Pension plan: | | \$ |
| | IRA: | | φ |
| | Retirement account: | | \$ |
| | Keogh: | | \$ |
| | Additional account | | \$ |
| | | | |
| . Security deposits and | Additional account: prepayments d deposits you have | made so that you may continue service or use from a company | \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments | made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications | \$ |
| Your share of all unused Examples: Agreements | prepayments d deposits you have with landlords, prepa | made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications estitution name or individual: | \$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have with landlords, prepa | aid rent, public utilities (electric, gas, water), telecommunications | \$\$ |
| Your share of all unused Examples: Agreements companies, or others No | prepayments d deposits you have with landlords, prepa | aid rent, public utilities (electric, gas, water), telecommunications | \$\$\$\$\$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have with landlords, prepa | aid rent, public utilities (electric, gas, water), telecommunications | \$ |
| Your share of all unused Examples: Agreements companies, or others No | prepayments d deposits you have with landlords, prepa | aid rent, public utilities (electric, gas, water), telecommunications | \$\$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have with landlords, prepa | naid rent, public utilities (electric, gas, water), telecommunications natitution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others No | prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil: Security deposit on re | naid rent, public utilities (electric, gas, water), telecommunications natitution name or individual: | \$ \$ \$ |
| Your share of all unused Examples: Agreements companies, or others No | prepayments d deposits you have with landlords, prepail Electric: Gas: Heating oil: Security deposit on re | naid rent, public utilities (electric, gas, water), telecommunications natitution name or individual: | \$\$ \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others No | prepayments d deposits you have with landlords, prepa Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: | naid rent, public utilities (electric, gas, water), telecommunications natitution name or individual: | \$\$ \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others | prepayments d deposits you have with landlords, prepa li Electric: Gas: Heating oil: Security deposit on r Prepaid rent: Telephone: Water: | ental unit: | \$\$ \$\$ \$\$ \$\$ |
| Your share of all unuser Examples: Agreements companies, or others I No Yes | prepayments d deposits you have with landlords, prepa Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | nstitution name or individual: | \$\$ \$\$ \$\$ \$\$ |
| Your share of all unused Examples: Agreements companies, or others No Yes | prepayments d deposits you have with landlords, prepa Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | ental unit: | \$\$ \$\$ \$\$ \$\$ |
| Your share of all unuser Examples: Agreements companies, or others No Yes | prepayments d deposits you have with landlords, prepa Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | nstitution name or individual: ental unit: ental unit: at of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ \$\$ |
| Your share of all unuser Examples: Agreements companies, or others \[\infty \] No \[\infty \] Yes | prepayments d deposits you have with landlords, prepa Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | nstitution name or individual: ental unit: ental unit: at of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ \$\$ |
| Examples: Agreements companies, or others No Yes | prepayments d deposits you have with landlords, prepa Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other: | nstitution name or individual: ental unit: ental unit: at of money to you, either for life or for a number of years) | \$\$ \$\$ \$\$ \$\$ |

Louis First Name

Debtor 1

Charles

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Debtor 1 Louis Charles Gutierrez Case number (if known) Case number (if known)

| and the second control of the second control | American superior and the superior and t | www.www.co.co.co.co.co.co.co.co.co.co.co.co.co. | |
|--|--|--|---|
| 24. Interests in an education IRA, in | an account in a qualified ABLE program, or under a qualified s | tate tuition program. | |
| 26 U.S.C. §§ 530(b)(1), 529A(b), | and 529(b)(1). | , | |
| ☑ No | | | |
| ☐ YesIns | stitution name and description. Separately file the records of any inte | | |
| le de | multion hame and description. Separately life the records of any inte | rests.11 U.S.G. § 521(c |): |
| | | | \$ |
| | | | \$ |
| | | | Ψ |
| _ | | | \$ |
| | | | |
| exercisable for your benefit | ests in property (other than anything listed in line 1), and rights | or powers | |
| | | | |
| ⊠ No | ************************************** | Walledown and the second secon | 7 |
| Yes. Give specific information about them | | | |
| mornation about them | | | \$ |
| 26 Patente convrighte tradomarke | , trade secrets, and other intellectual property | | and |
| Examples: Internet domain names | , trade secrets, and other intellectual property , websites, proceeds from royalties and licensing agreements | | |
| ☑ No | , websites, proceeds non-royalties and neersing agreements | | |
| | | | 3 |
| Yes. Give specific information about them | | | |
| momation about them. | | | \$ |
| 27 Lieanna franchises and atten- | and the state of t | - VIVIEWILL III | • |
| 27. Licenses, franchises, and other | general intangibles sive licenses, cooperative association holdings, liquor licenses, profe | | |
| | ave ilcenses, cooperative association holdings, liquor licenses, profe | ssional licenses | |
| ⊠ No | | | • |
| Yes. Give specific Information about them | | | |
| information about them | | | \$ |
| | | A Para Mala | a. |
| Money or property owed to you? | | | Current value of the |
| | | | portion you own? Do not deduct secured |
| | | | claims or exemptions. |
| 28. Tax refunds owed to you | | | |
| ĭ No | | | |
| Yes. Give specific information | | | |
| about them, including whe | ether | Federal: \$ | |
| you already filed the return | ns | State: \$ |) |
| and the tax years | •••••• | Local: \$ | |
| | | - · · · · · · · · · · · · · · · · · · · | |
| 20 Family support | | | |
| 29. Family support | limony, spousal support, child support, maintenance, divorce settlen | | |
| No No | amony, spousar support, critic support, maintenance, divorce settlen | ient, property settlemen | t |
| | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | |
| Yes. Give specific information. | •••••• | *10 | |
| | | Alimony: | \$ |
| | | Maintenance: | \$ |
| | | Support: | \$ |
| | | Divorce settlement: | \$ |
| | | Property settlement: | \$ |
| 30. Other amounts someone owes ye | Oll | | ··· · |
| Examples: Unpaid wages, disability | r insurance payments, disability benefits, sick pay, vacation pay, wo | rkers' compensation | |
| Social Security benefits | ; unpaid loans you made to someone else | ostuponoation, | |
| ☑ No | | | |
| Yes. Give specific information | THE TAX CALLED AND THE TAX CALLE | A THE CONTRACT OF THE CONTRACT | |
| | *** | жени рассия | \$ |
| | | | |

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Gutierrez Charles Louis Debtor 1 First Name Last Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Surrender or refund value: Yes. Name the insurance company Beneficiary: Company name: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☑ No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☑ No Yes, Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☑ No Yes. Describe each claim..... 35. Any financial assets you did not already list ☑ No. Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached s620.45 for Part 4. Write that number here Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Part 5: 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you aiready earned X No Yes. Describe..... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☑ No Yes. Describe.....

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| Debtor 1 | Louis First Name | Charles | Gutierrez | Case number (if known) | |
|--|-------------------------------------|---|--|--|--|
| | , was statio | macor stante | Last Hame | | |
| 40. Machine | rv. fixtures. | eauipment, suon | lies you use in business, a | and tools of your trade | |
| ⊠ No | •, | | | • | |
| 3 | Describe | PEROTATION CONTRACTOR OF THE STREET | 74/31-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1- | THE ANALYSIS AND ASSESSED ASSESSEDANCE ASSESSED ASSESSEDA | |
| eastan e e e e e e e e e e e e e e e e e e e | | | | | \$ |
| 41. Inventor | v | | | | |
| ⊠ No | | | | | |
| ☐ Yes. | Describe | | | | \$ |
| - | | | | | |
| 42. Interests | in partnerst | nips or joint vent | ures | | |
| | Describe | Name of entity: | | | |
| | | rvame or entity. | | % of ownership: | |
| a | | | | % % | \$ \$ |
| Vaccination A P P P | | | | % | \$ |
| 43 Custome | rliete maili: | ng lists, or other | compilations | | |
| ⊠ No | | | | | |
| | | include persona | Illy identifiable information | n (as defined in 11 U.S.C. § 101(41A))? | |
| | ☑ No ☑ Yes. Desc | vribo [| THE PARTY OF THE P | | alan Malay |
| • | Tes. Desi | inde | | | \$ |
| 44 Any buol | naaa ralatad | | | 777000 aphilibidadas | NO COMA |
| No No | ness-related | property you did | i not aiready list | | |
| | Give specific | | | | ¢ |
| INIOIII | nation | | | | \$ \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| | | | | | \$ |
| 45. Add the o | iollar value d | of all of your entr | ies from Part 5, including | any entries for pages you have attached | |
| for Part 5 | . Write that i | number here | | | \$0.00 |
| to the state of th | Mary and the desired desired ways a | * Selection and Administration on the Selection of the Control of | | The second secon | |
| Part 6: | Describe A | ny Farm- and C | ommorpial Fishing Rel | ated Property You Own or Have an Interest I | |
| I | f you own or | have an interest | in farmland, list it in Part | 1. | ٦. |
| 45 De 11011 ou | | | | | |
| 46. D0 y00 00 ■ No. G | o to Part 7. | ny legal or equita | able interest in any farm- o | or commercial fishing-related property? | |
| Yes. G | o to line 47. | | | | |
| | | | | | Current value of the |
| | | | | | portion you own? Do not deduct secured claims |
| 47. Farm anir | nals | | | | or exemptions, |
| | : Livestock, p | oultry, farm-raised | l fish | | |
| ⊠ No | • | 7/11/2010/1/2012/1/2012/ | | | |
| ☐ Yes | | constant of the second of the | 777777777777777777777777777777777777777 | | |
| | | | | | \$ |

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| Debtor 1 | Louis | Charles | Gutierrez | Case number (if known) | | |
|------------------------|---|---------------------|--|---|---|--|
| | First Name | Middle Name | Last Name | | | |
| 48. Crops—e | ither growing | g or harvested | | | | . |
| ⊠ No | | | | | | |
| | Give specific nation | | | | | \$ |
| 49. Farm and | fishing equi | | ents, machinery, fixtures | | | |
| ⊠ No □ vos | | | | | | |
| u res | , | | | | | \$ |
| 50. Farm and | d fishing sup | plies, chemicals | | | | ¥ + |
| ⊠ No | | | | | | Actual Section |
| ☐ Yes | | | | | | \$ |
| es Any form | and comm | projet fishing rel | ated property you did n | of already list | | |
| ☑ No | | 4450450 | | | | |
| | Give specific nation | | | | | \$ |
| 52 Add the | dollar value | of all of your en | ries from Part 6, includi | ing any entries for pages you have attached | | \$0.00 |
| for Part | 6. Write that | number here | | | → | V. W. |
| 930-95 | | | NATIONAL STREET, STATE OF STAT | No. 10 10 10 10 10 10 10 10 10 10 10 10 10 | | |
| Part 7: | Describe | All Property | You Own or Have | an Interest in That You Did Not List Ab | ove | |
| 53. Do you l | have other p | roperty of any ki | nd you did not already l | list? | | O COT Y COT TO C |
| | : Season tickets | s, country club mem | | | 1 | Accordance in |
| ☐ No ☑ Yes. | Give specific | Old Key Wes | st | | | \$ <u>6,762.25</u> |
| infor | mation | | | | Avendra de la composito de la | \$ |
| | | | | | | , |
| 54. Add the | dollar value | of all of your ent | tries from Part 7. Write t | that number here | → | \$ <u>6,762.25</u> |
| | and a second condition of the second of the | | | | | |
| Part 8: | List the T | otals of Eac | h Part of this Form | 1 | | |
| 55 Part 1: 7 | otal real esta | ate. line 2 | | | → | \$ <u>167,375.00</u> |
| an annual and a second | fotal vehicles | | | \$14,9 <u>82.00</u> | | |
| | | al and household | l itome line 15 | \$3,800.00 | | |
| | | | , items, inte 13 | \$620.45 | | |
| | | il assets, line 36 | | · | | |
| 59. Part 5: 1 | Total busines | s-related proper | rty, line 45 | \$ <u>0.00</u> | | : |
| 60. Part 6: | Fotal farm- a | nd fishing-relate | d property, line 52 | \$ <u>0.00</u> | | |
| 61, Part 7: | Total other p | roperty not listed | d, line 54 | + \$6,762.25 | | |
| 62. Total pe | ersonal prope | erty. Add lines 56 | through 61 | \$26,164.70 Copy personal property t | iotal 👈 | + \$26,164.70 |
| | | | | <u> </u> | | |
| 63. Total of | all property | on Schedule A/E | 3. Add line 55 + line 62 | | | \$193,539.70 |

war a sawaya a aa waa aa aa aa aa aa aa aa

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| | | entify your case: | |
|---------------------------|------------------|------------------------|-----------------|
| Debtor 1 | Louis | Charles | Gutierrez |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Sherry | Coleen | Gutierrez |
| (Spouse, if filing |) First Name | Middle Name | Last Name |
| United States | Bankruptcy Court | or the: Northern Distr | ict of Illinois |
| . | | | |
| Case number (If known) | | | |

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| P | art 1: Identi | fy the Property You Claim | ı as Exempt | | |
|----|---------------------------------|---|--------------------------------------|---|------------------------------------|
| 1. | 🗵 You are cla | xemptions are you claiming? iming state and federal nonban iming federal exemptions. 11 U | kruptcy exemptions. 11 | = - | |
| 2. | For any proper | rty you list on <i>Schedule A/B</i> t | hat you claim as exem | pt, fill in the information below. | |
| | Brief descripti Schedule A/B | on of the property and line on that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| | Brief description: | 219 Prairie Ridge Dr. | <u>\$ 167,375.00</u> | ∑ \$ 23,348.00 | 735 ILCS 5/12-901 |
| | Line from Schedule A/B: | 1.1 | | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | See Attachment 1 | \$ <u>16.00</u> | ☒ \$ 16.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: | 17.3 | | 100% of fair market value, up to any applicable statutory limit | |
| | Brief description: | See Attachment 2 | \$_1,000.00 | ☑ \$ _1,000.00 | 735 ILCS 5/12-1001(b) |
| | Line from Schedule A/B: | 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| 3. | | ng a homestead exemption o | | | |
| | ⊠ No | | | s filed on or after the date of adjustment. 1,215 days before you filed this case? |) |

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Debtor 1

| Louis (| Charles Gutierrez | | Case number (if known) | |
|------------|-------------------|-----------|------------------------|--|
| First Name | Middle Name | Last Name | | |

Additional Page

| | on of the property and line VB that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--|--|---|--|------------------------------------|
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief | Personal jewelry | \$ 2,000.00 | ☒ \$ 2,000.00 | 735 ILCS 5/12-1001(b) |
| description: Line from Schedule A/B: | 12 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief | Books | \$ 200.00 | ☒ \$ 200.00 | 735 ILCS 5/12-1001(b) |
| description: Line from Schedule A/B: | 6 | 7 | 100% of fair market value, up to any applicable statutory limit | |
| Brief | See Attachment 3 | \$ 500.00 | ☒ \$ 500.00 | 735 ILCS 5/12-1001(b) |
| description: Line from Schedule A/B: | 11 | φ <u>σσσ.υσ</u> | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief | See Attachment 4 | \$ 100.00 | ☒ \$ 100.00 | 735 ILCS 5/12-1001(b) |
| description: Line from Schedule A/B: | 6 | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | . \$ | U \$ | |
| Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | . \$ | s | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | . \$ | s | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | . \$ | \$ \$ 100% of fair market value, up to | |
| Line from Schedule A/B: | | | any applicable statutory limit | |
| Brief description: | | _ \$ | \$ | |
| Line from Schedule A/B: | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | . \$ | s | |
| Line from Schedule A/B: | | | ☐ 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | | _ \$ | \$\$ 100% of fair market value, up to | |
| Line from Schedule A/B: | · | | any applicable statutory limit | |
| Brief description: | | . \$ | _ 🗆 \$ | |
| Line from Schedule A/B: | . | | ☐ 100% of fair market value, up to any applicable statutory limit | |

Attachment Debtor: Louis Charles Gutierrez Case No:

Attachment 1

Savings Account with PNC Bank

Attachment 2

Household goods for a family of 3 (including living room and bedroom furniture, basement furniture, kitchen ware and pots and pans

Attachment 3

Personal clothes for a family of 3

Attachment 4

Household office goods/computer/printer

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|--|--|--|---|--|
| Fill in this information to identify your case: | | | | |
| Orași de la Salat de la Salat de Salat Salat de Salat de Sa | | | | |
| Debtor 1 Louis Charles Gutierrez First Name Middle Nam | te Last Name | | | |
| Debtor 2 Sherry Coleen Gutierrez | | | | |
| (Spouse, if filing) First Name Middle Nam | | | | |
| United States Bankruptcy Court for the: Northern | District of Illinois | | | |
| Case number (If known) | | | Check if amended | |
| Official Form 106D | | | | |
| Schedule D: Creditors | Who Have Claims Secure | d by Prop | erty | 12/15 |
| Do any creditors have claims secured by No. Check this box and submit this form Yes. Fill in all of the information below. Part 1: List All Secured Claims | n to the court with your other schedules. You have nothi | ng else to report on | this form. | |
| for each claim. If more than one creditor h | nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Chase Auto Finance | Describe the property that secures the claim: | _{\$} 17,738.16 | _{\$} 14,982.00 | \$ 2,754.16 |
| Creditor's Name P.O. Box 9001083 | 2013 Cadillac SRX with 45000 miles. | Profit maker (Appropriate Control of Control | | |
| Number Street | As of the date you file, the claim is: Check all that apply. | | | |
| | Contingent | | | |
| Louisville KY See City State ZIP Code | Unliquidated Disputed | | | |
| | | | | |
| Who owes the debt? Check one. Debtor 1 only | Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) | | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien)☐ ☐ Judgment lien from a lawsuit | | | |
| At least one of the debtors and another | Other (including a right to offset) | | | |
| Check if this claim relates to a community debt | • | | | |
| Date debt was incurred | Last 4 digits of account number 4 5 0 2 | | | |
| 2.2 Monera Financial | Describe the property that secures the claim: | <u>\$6,762.25</u> | <u>\$6,762.25</u> | \$ <u>0.00</u> |
| Creditor's Name | Old Key West | | | |
| 3313 S. Arlington Ave. | _ | | | |
| Mailhei Oncer | As of the date you file, the claim is: Check all that apply | • | | |
| | Contingent | | | |

Last 4 digits of account number 0 6 2 8

\$<u>24,500.4</u>1

An agreement you made (such as mortgage or secured

☐ Statutory lien (such as tax lien, mechanic's lien)

Indianapolis

Debtor 1 only

Debtor 2 only

Who owes the debt? Check one.

Debtor 1 and Debtor 2 only

community debt

Date debt was incurred

At least one of the debtors and another

Check if this claim relates to a

IN

46203

State ZIP Code

Unliquidated

car loan)

Add the dollar value of your entries in Column A on this page. Write that number here:

Nature of lien. Check all that apply.

Judgment lien from a lawsuit

Other (including a right to offset)

☐ Disputed

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Louis Charles Gutierrez Debtor 1 Case number (if known) Middle Name Last Name Column A **Additional Page** Column B Column C Amount of claim Value of collateral Part 1: Unsecured After listing any entries on this page, number them beginning with 2.3, followed that supports this Do not deduct the portion by 2.4, and so forth. claim value of collateral. If any 23 The Money Source Describe the property that secures the claim: \$144,027.00 \$ 167,375.00 \$ 0.00 Creditor's Name 500 South Broad St., Suite 100A As of the date you file, the claim is: Check all that apply. Contingent Meriden 06450 ZIP Code Unliquidated ☐ Disputed Who owes the debt? Check one Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 2 1 6 1 2.4 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 25 Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code ☐ Unliquidated State Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: s 144,027.00 If this is the last page of your form, add the dollar value totals from all pages. 168,527.41 Write that number here:

Attachment
Debtor: Louis Charles Gutierrez Case No:

Attachment 1

40290-1083

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| Fill in this i | nformation to ide | entify your case: | | | |
|---------------------------|---------------------|-------------------------|----------------|---|----------------|
| Debtor 1 | Louis Charles | s Gutierrez | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Sherry Cole | en Gutierrez | | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | _ | |
| United States | Bankruptcy Court fo | r the: Northern Distric | et of Illinois | _ | |
| Case number (If known) | | | | | ☐ Cheo amer |

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| Pa | rt 1: List All of Your PRIORITY Unsecur | ed Claims | | | |
|---|---|--|-----------------------------|--|----------------|
| 1. | Do any creditors have priority unsecured claim | s against you? | | | |
| | No. Go to Part 2. | | | | |
| | ☐ Yes. | | | | |
| Milita Milanal III anuman | each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of | editor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list to claims in alphabetical order according to the creditor's r Part 1. If more than one creditor holds a particular clair | nat claim name If v | here and show both | n priority and |
| | (For an explanation of each type of claim, see the | instructions for this form in the instruction booklet.) | | | |
| | | | Total | a bank to make the country of the co | Nonpriority |
| | | | | amount | amount |
| 2.1 | | Last 4 digits of account number | \$. | \$ | \$ |
| | Priority Creditor's Name | | ' | | <u> </u> |
| | | When was the debt incurred? | | | |
| | Number Street | | | | |
| *************************************** | | As of the date you file, the claim is: Check all that appl | y. | | |
| | City State ZIP Code | ☐ Contingent | | | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | | | |
| | Debtor 1 only | ☐ Disputed | | | |
| defendance | Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | • • | | | |
| | At least one of the debtors and another | Domestic support obligations | | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts you owe the government | | | |
| | Is the claim subject to offset? | Claims for death or personal injury while you were intoxicated | | | |
| Annual Control | No | Other. Specify | | | |
| | Yes | | - | | |
| 2.2 | | | WEEKALANINE THE PROPERTY OF | A CONTRACTOR OF THE PARTY OF TH | |
| H | Priority Creditor's Name | Last 4 digits of account number | \$ | \$ | \$ |
| | | When was the debt incurred? | | | |
| - Anna | Number Street | As of the date you file the slaim in Otental Burney | | | |
| 7 | | As of the date you file, the claim is: Check all that apply | <i>l</i> . | | |
| | City State ZIP Code | ☐ Contingent ☐ Unliquidated | | | |
| | • | Disputed | | | |
| | Who incurred the debt? Check one. Debtor 1 only | C Disputed | | | |
| | Debtor 2 only | Type of PRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | Domestic support obligations | | | |
| | At least one of the debtors and another | Taxes and certain other debts you owe the government | | | |
| orange Ho | ☐ Check if this claim is for a community debt | Claims for death or personal injury while you were intoxicated | | | |
| | is the claim subject to offset? | Other. Specify | | | |
| | □ No | | | | |
| L | ☐ Yes | | | | |

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Debtor 1

Louis Charles Gutierrez
First Name Middle Name

Last Name

| Par | 24 List All of Your NONPRIORITY Unsecured Claims | - Control of the Cont | |
|------|--|--|--|
| 3. [| Oo any creditors have nonpriority unsecured claims against you? | | announced laurely. |
| | No. You have nothing to report in this part. Submit this form to the o | court with your other schedules. | Acceptony |
| F | list all of your nonpriority unsecured claims in the alphabetical or or ordering unsecured claim, list the creditor separately for each claim. For included in Part 1. If more than one creditor holds a particular claim, list lit the Continuation Page of Part 2. | each claim listed. Identify what fyde of clairff ILIS. DO HULIIST 9 | Hallin all cauy |
| | | | Total claim |
| 1 | Capital One Nonpriority Creditor's Name | Last 4 digits of account number | \$7,202.00 |
| | 15000 Capital One Dr. | When was the debt incurred? | 2 |
| | Number Street Richmond VA 23238 City State ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | | ☐ Contingent | |
| | Who incurred the debt? Check one. | Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is the claim subject to offset? | □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card Charges | |
| | ☑ No ☐ Yes | Other, Specify Orean Sandy | |
| | | | \$ 2,320.00 |
| .2 | CBNA | Last 4 digits of account number | \$ 2,020.00 |
| | Nonpriority Creditor's Name | Wileli was the debt incurred: | |
| | P.O. Box 6189 Number Street | | |
| | Sioux Falls SD 57117 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated ☐ Disputed | |
| | Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is the claim subject to offset? | Debts to pension or profit-sharing plans, and other similar debts | • |
| | ☑ No | ☑ Other Specify <u>Credit Card Charges</u> | |
| | Yes | | NOONES AND THE STREET OF T |
| 4.3 | Credit One Bank | Last 4 digits of account number | \$_4,829.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | P.O. Box 98875 Number Street | | |
| | Las Vegas NV 89193 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | ☐ Unliquidated | |
| | Debtor 1 only | ☐ Disputed | |
| | Debtor 2 only | T MONDROPITY | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| | Is the claim subject to offset? ③ No | □ Debts to pension or profit-sharing plans, and other similar debt □ Other. Specify Credit Card Charges | 5 |
| | ☐ Yes | Other, Specify Oredit Gard Charges | |

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Debtor 1

Louis Charles Gutierrez Middle Name

Last Name

| After | listing any entries on this page, number them beginning with | 1 4.5, followed by 4.6, and so forth. | Total clain |
|----------------|---|--|---------------------|
| .4 | Heights Finance Corp | Last 4 digits of account number | \$ 1,467.0 0 |
| | 1145 Essington Rd. | When was the debt incurred? | |
| | Joliet IL 60435 | As of the date you file, the claim is: Check all that apply. | |
| ٧ | Dity State ZIP Code Who incurred the debt? Check one. ☐ Debtor 1 only | ☐ Contingent ☐ Unliquidated ☐ Disputed | |
| C | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [[]: | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset? | □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Personal Loan | |
| 5 _k | ☐ Yes Kohl's/Capital One | Last 4 digits of account number | \$ 250.00 |
| и 1 | lonpriority Creditor's Name N56 W 17000 Ridgewood Dr. | When was the debt incurred? | |
| | lumber Street Menomonee Falls WI 53051 | As of the date you file, the claim is: Check all that apply. | |
| V | State ZIP Code Who incurred the debt? Check one. Debtor 1 only | Contingent Unliquidated Disputed | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: Student loans | |
| ls Ø | At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset? No Yes | □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card Charges | |
| 3 1 | Merrick Bank Corp | Last 4 digits of account number | \$2,756.00 |
| No. | onpriority Creditor's Name P.O. Box 9201 | When was the debt incurred? | |
| | umber Street DId Bethpage NY 11804 | As of the date you file, the claim is: Check all that apply. | |
| Ci W | ity State ZIP Code The incurred the debt? Check one. | ☐ Contingent☐ Unliquidated☐ Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ls X | I Check if this claim is for a community debt the claim subject to offset? I No I Yes | □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card Charges | |

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Debtor 1

Louis Charles Gutierrez

Last Name

| _Part | 24 Your NONPRIORITY Unsecured Claims —Continuat | tion Page | |
|--|---|--|--|
| Aftei | listing any entries on this page, number them beginning with 4 | i.5, followed by 4.6, and so forth. | Total claim |
| 4.7 | Silver Cross Hospital | Last 4 digits of account number | \$ 862.08 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 7008 Solution Center | | 1 |
| | Number Street Chicago II 60677-7000 | As of the date you file, the claim is: Check all that apply. | 1000 |
| | Chicago IL 60677-7000 City State ZIP Code | ☐ Contingent | 1 |
| | | Unliquidated | i and a second |
| | Who incurred the debt? Check one. | ☐ Disputed | 2222 |
| | Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | - |
| | Debtor 2 only Debtor 1 and Debtor 2 only | ☐ Student loans | THE STATE OF THE S |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | ļ |
| | ☐ Check if this claim is for a community debt | you did not report as priority claims | |
| | Is the claim subject to offset? | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other, Specify Medical Services | |
| | X No | Curior, opening in a curior in | |
| | Yes | | |
| 4.8 | OVALOR II | Last 4 digits of account number | \$ 4,198.00 |
| | SYNCB Home Nonpriority Creditor's Name | | |
| | P.O. Box 965036 | When was the debt incurred? | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| COLUMN AND AND AND AND AND AND AND AND AND AN | Orlando FL 32896 City State ZIP Code | ☐ Contingent | |
| NAV (NAV) | City State ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | ☐ Disputed | |
| | Debtor 1 only | CMOMPRIORITY a sured claim: | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Student loans Obligations arising out of a separation agreement or divorce that | |
| | | you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify Credit Card Charges | |
| Manage of the state of the stat | ☑ No ☐ Yes | | |
| 4.9 | | | _{\$} 2,327.00 |
| 1 | SYNCB/Care Credit | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 950 Forrer Blvd. | _ | |
| | Number Street Kettering OH 45420 | As of the date you file, the claim is: Check all that apply. | |
| | City State ZIP Code | Contingent | |
| Populari de la constanta de la | Mills - Improved the debt2 Obselves | Unliquidated | |
| Value of the latest of the lat | Who incurred the debt? Check one. | ☐ Disputed | |
| *************************************** | Debtor 1 only Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ************************************** | Debtor 1 and Debtor 2 only | ☐ Student toans | |
| ANALAS MANAGAMANA | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that | |
| Whitelest | ☐ Check if this claim is for a community debt | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | Other. Specify Credit Card Charges | |
| | No | | |
| | ☐ Yes | | |
| 1 | | | |

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Debtor 1

Louis Charles Gutierrez First Name Middle Name

| Part 2: Your NONPRIORITY Unsecured Claims —Conti | nuation Page | |
|--|--|--------------------|
| After listing any entries on this page, number them beginning w | ∕ith 4.5, followed by 4.6, and so forth. | Total claim |
| SYNCB/JCP Nonpriority Greditor's Name | Last 4 digits of account number | \$ <u>402.00</u> |
| P.O. Box 965007 Number Street | When was the debt incurred? | |
| Orlando FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Charges | |
| SYNCB/Lowes Nonpriority Creditor's Name P.O. Box 965005 Number Street Oriando FL 32896 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | Last 4 digits of account number | \$ <u>1,663.00</u> |
| Nonpriority Creditor's Name | Last 4 digits of account number | \$ |
| Number Street | When was the debt incurred? | |
| City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |

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Debtor 1

Louis Charles Gutierrez

6j. Total, Add lines 6f through 6i.

Case number (if known)

Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. Total claim 6a. Domestic support obligations 6a. Total claims from Part 1 6b. Taxes and certain other debts you owe the 6b. government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total. Add lines 6a through 6d. Total claim 6f. 6f. Student loans \$0.00 Total claims from Part 2 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority \$0.00 6g. claims 6h. Debts to pension or profit-sharing plans, and other 6h. \$<u>0.00</u> similar debts 6i. Other. Add all other nonpriority unsecured claims. \$28,276.08 Write that amount here.

6j.

\$28,276.08

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| Fil | l in this i | nformation to | identify your | case: | | | |
|------------|------------------------------|---|---|--|--|--|--|
| De | btor | Louis Charle | es Gutierrez | | | | |
| n. | a | First Name | м een Gutlerrez | ddle Name | Last Name | | |
| | btor 2 ouse If filing) | | | ddle Name | Last Name | | |
| Un | ited States | Bankruptcy Co | urt for the: Northe | ern District of Illinois | | | |
| Ca | se number | | | | | | |
| (lf | known) | | | | | | Check if this is ar |
| | | | | | | | amended filing |
| Ωf | ficial I | Form 10 | 16G | | | | |
| | 18:00 | | | | | | |
| 50 | hed | ule G: | Execute | ory Contra | acts and | Unexpired Leases | 12/15 |
| Be a | s comple | ete and accui | rate as possible | e. If two married pe | ople are filing to | gether, both are equally responsible for s | supplying correct |
| addi | tional pa | ges, write yo | e is needed, co ur name and c | ppy the additional pa ase number (if knov | age, fill it out, nu wn). | imber the entries, and attach it to this page | ge. On the top of any |
| | | | | | | | |
| 1. | | | | ts or unexpired leas | | | |
| | ₩ No. C | Check this box | and file this for | m with the court with | your other sched | lules. You have nothing else to report on this | s form. |
| ^ | | | | | | e listed on Schedule A/B: Property (Official F | |
| | example unexpired | , rent, venici | e lease, cell ph | pany with whom you one). See the instruc | u have the contr ctions for this form | act or lease. Then state what each contra n in the instruction booklet for more example | ict or lease is for (for es of executory contracts and |
| | Person c | or company v | vith whom you | have the contract of | or lease | State what the contract or lease | is for |
| 2.1 | | | | | | | |
| | Name | | | | | - | |
| | 1141119 | | | | | | |
| | Number | Street | | | | • | |
| | City | | State | ZIP Code | | | |
| 2.2 | kement mengengan ngarupan pa | aan taataba maanaa geegeney (qooyaa a ooyaa | 323e888sewherryssyn, myngaryn, campropaes | illa et sen med men geographe et de entre de la senta de la desta | CTIVILLES SELECTED CONTROL CON | | Chapter of the property of the control of the contr |
| | Name | | | | | | |
| | | | | | | | |
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| ********** | City | | State | ZIP Code | | | |
| 2.3 | | makes of the Control | | Took I a week of a feeting of the second state of a second | THE COLUMN TWO ISSUES AS A SECOND OF THE PROPERTY OF THE PROPE | | |
| | Name | | | | · | | |
| | N 6 | | | | | | |
| | Number | Street | | | | | |
| over-Lon- | City | K-9777 T 1077 | State | ZIP Code | | A POPT OF THE POPT | |
| 2.4 | | | | | | | A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | Name | | | | | | |
| | Number | Street | | | | | |
| | | | | | | | |
| | City | ************************************** | State | ZIP Code | is-enverse. | | |
| .5 | -: | | | | | | |
| | Name | | | - | | | |
| | Number | Street | | | · | | |
| | Cit. | | | | | | |
| | City | | State | ZIP Code | | | |

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| Fill in this in | formation to ide | entify your case: | | | |
|---------------------------|---------------------|---------------------------------|-----------|---|--------------------|
| Debtor 1 | Louis Charles G | utierrez | Last Name | _ | |
| Debtor 2 | Sherry Coleen | | | _ | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court fo | or the: Northern District of II | linois | | |
| Case number (if known) | | | | | ☐ Check if this is |
| | | | | | amended fil |

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| | a any andahtara? (If | 'unu are filing a joint case, de act li | ist either spause as | s a codebior.) | |
|--|---|---|---|---|-------|
| o you nav ⊠ No | e any codeptors? (II | you are filing a joint case, do not li | iat etitici apodac di | d a bodostotty | |
| ⊒i Yes | | | | | |
| | last 8 vears, have vo | ou lived in a community property | state or territory? | ? (Community property states and territories include | |
| Arizona, Ca | ilifornia, Idaho, Louisia | ana, Nevada, New Mexico, Puerto | Rico, Texas, Wasi | hington, and Wisconsin.) | |
| 🗵 No. Go | to line 3. | | | | |
| 🔲 Yes. Die | d your spouse, former | r spouse, or legal equivalent live w | ith you at the time? | ? | |
| ☐ No | | | | | |
| ☐ Yes | s. In which community | state or territory did you live? | | . Fill in the name and current address of that person. | |
| Nan | ne of your spouse, former sp | ouse, or legal equivalent | | | |
| Nun | mber Street | | | | |
| City | | State | ZIP Code | | |
| | | | | r if your spouse is filing with you. List the person | |
| Schedule : | line 2 again as a code D (Official Form 106I E/F, or Schedule G to | D), S <i>chedule E/F</i> (Official Form 1 | irantor or cosigne 06E/F), or Schedu | er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D, | |
| Schedule : | D (Official Form 106 | D), S <i>chedule E/F</i> (Official Form 1 | rrantor or cosigne 06E/F), or Schedu | er. Make sure you have listed the creditor on ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe to Check all schedules that apply: | the d |
| Schedule : | D (Official Form 106I E/F, or Schedule G to | D), S <i>chedule E/F</i> (Official Form 1 | irantor or cosigne 06E/F), or Schedu | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe t Check all schedules that apply: | the d |
| Schedule : | D (Official Form 106I E/F, or Schedule G to | D), S <i>chedule E/F</i> (Official Form 1 | rantor or cosigne | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe t Check all schedules that apply: Schedule D, line | the d |
| Schedule Schedule Column 1 | D (Official Form 106I E/F, or Schedule G to | D), S <i>chedule E/F</i> (Official Form 1 | irantor or cosigne 06E/F), or Schedu | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe t Check all schedules that apply: | the d |
| Schedule Schedule Column 1 Name Number | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 o fill out Column 2. | 06E/F), or Schedu | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line | the d |
| Schedule Schedule Column 1 Name Number City | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), S <i>chedule E/F</i> (Official Form 1 | rantor or cosigne 06E/F), or Schedu | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line | the d |
| Schedule Schedule Column 1 Name Number City | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 o fill out Column 2. | 06E/F), or Schedu | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line | the d |
| Schedule Schedule Column 1 Name Number City | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 o fill out Column 2. | 06E/F), or Schedu | Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line | the d |
| Schedule Schedule Column 1 Name Number City | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 o fill out Column 2. | 06E/F), or Schedu | ule G (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line | the d |
| Schedule Schedule Column 1 Name Number City Name | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 o fill out Column 2. | 06E/F), or Schedu | Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line | the d |
| Schedule Schedule Column 1 Name Number City Name Number City | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 to fill out Column 2. | ZiP Code | Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule D, line Schedule D, line | the d |
| Schedule Schedule Column 1 Name Number City Number | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 to fill out Column 2. | ZiP Code | Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line | the d |
| Schedule Schedule Column 1 Name Number City Number City Name | D (Official Form 1061 E/F, or Schedule G to : Your codebtor Street | D), Schedule E/F (Official Form 1 to fill out Column 2. | ZiP Code | Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line | the d |
| Schedule Schedule Column 1 Name Number City Number City Number | D (Official Form 1061 E/F, or Schedule G to : Your codebtor | D), Schedule E/F (Official Form 1 to fill out Column 2. | ZiP Code | Column 2: The creditor to whom you owe to Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line | the d |

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| Fill in this in | formation to identify y | Our case. | | **** | | | |
|--|---|--|--|------------------|--|---|---|
| | ioniation to facility y | our case. | | | | | |
| Debtor 1 | Louis Charles Gutierre | | ast Name | | _ | | |
| Debtor 2 | Sherry Coleen Gutien | | | | | | |
| (Spouse, if filing) | | | ast Name | | | | |
| United States E | Bankruptcy Court for the: _ | Northern District of Illinois | | | | | |
| Case number (If known) | | | | | Check if | this is: | |
| | | | | | | mended filing | |
| | | | | | | oplement showing post-petition er 13 income as of the following o | data |
| Official Fo | rm 106I | | | | | | Jale, |
| Schod | ule I: You | r Income | | | MM / | DD / YYYY | |
| | | | ······································ | | | or 2), both are equally responsible | 12/15 |
| If you are sepa separate shee | rect information. If you arated and your spous | u are married and not filing se is not filing with you, do top of any additional page: | g jointly, and you a not include info | ir spo irmat | ouse is living with ion about your sp | you, include information about you ouse. If more space is needed, atta known). Answer every question. | IF COOLICA |
| 1. Fill in you information | r employment on. | | Debtor 1 | | | Debtor 2 or non-filing spous | e |
| attach a se | e more than one job, eparate page with n about additional | Employment status | | ed | - | | en er |
| | rt-time, seasonal, or | | | | | . , | |
| | yed work. n may include student aker, if it applies. | Occupation | Service Manage | er | | Circulation Clerk | |
| | , и к арружи | Employer's name | Castle Auto Gro | up | | Three Rivers Public Library | |
| | | Employer's address | 175 Arlington He Number Street | ights | Rd. | 301 N. Wabena Rd. Number Street | |
| For Andrews Conference | | | Elk Grove Village | e, Illin Stat | | Minooka, IL 60447 City State ZiP | Code |
| | | How long employed there | ? 1 Year 2 Mc | onths | | 2 Years 3 Months | |
| Part 2: | Give Details About | Monthly Income | | | | | |
| Estimate r | nonthly income as of ess you are separated. | the date you file this form. | | | | write \$0 in the space. Include your no | n-filing |
| If you or yo below, If yo | our non-filing spouse ha ou need more space, at | ve more than one employer, tach a separate sheet to this | , combine the info s form, | rmatio | on for all employers | for that person on the lines | |
| 2 liet mani | thly gross wages ==t= | and occurring to the | " | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| deduction | s). If not paid monthly, i | rry, and commissions (before calculate what the monthly v | ore all payroll vage would be. | 2. | \$ 7,271.07 | \$ 697.56 | |
| 3. Estimate | and list monthly over | time pay. | | 3. | +\$ 0.00 | + \$ 0.00 | |
| 4. Calculate | gross income. Add lin | e 2 + line 3. | | 4. | \$_7,271.07 | \$ <u>697.56</u> | |

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Debtor 1

| ebtor 1 | Louis Charles Gutierrez First Name Middle Name Last Name | Case number (if known) | | | | | | | |
|---------------|---|------------------------|---------------------|----------|-----------------------------------|----------------------------|----------|-------------------------|---|
| | | | For Debtor 1 | | For Debtor 2 or non-filing spouse | | | | |
| Co | by line 4 here | 4. | \$_7,271.07 | | \$ <u>697.56</u> | _ | | | |
| 5. List | all payroll deductions: | | | | | | | | *************************************** |
| 5a | . Tax, Medicare, and Social Security deductions | 5a. | \$ 1,481.13 | | \$_150.95 | _ | | | - |
| | Mandatory contributions for retirement plans | 5b. | \$ 0.00 | _ | \$ 0.00 | _ | | | State of the state of |
| 5c | Voluntary contributions for retirement plans | 5c. | \$ 0.00 | _ | \$_0.00 | _ | | | Moderatoria |
| 5d | . Required repayments of retirement fund loans | 5d. | \$ 0.00 | _ | \$ 0.00 | | | | |
| 5e | . Insurance | 5e. | \$ <u>0.00</u> | | \$_0.00 | | | | and the second |
| 5f. | Domestic support obligations | 5f. | \$ 0.00 | _ | \$_0.00 | | | | |
| 5g | . Union dues | 5g. | \$0.00 | | \$ 0.00 | _ | | | |
| 5h | Other deductions. Specify: See Attachment 1 | 5h. | + \$ 1,195.70 | _ | + \$ 38.61 | _ | | | |
| 6. A 0 | id the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$ 2,676.83 | _ | <u>\$ 189.56</u> | _ | | | |
| 7. C a | lculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ <u>4,594.24</u> | _ | \$ 508.00 | _ | | | |
| 8. Lis | t all other income regularly received: | | | | | | | | |
| 8a | Net income from rental property and from operating a business, profession, or farm | | | | | | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ <u>0.00</u> | _ | \$ <u>0.00</u> | _ | | | |
| 81 |). Interest and dividends | 8b. | \$ 0.00 | | \$_0.00 | _ | | | |
| 80 | E. Family support payments that you, a non-filing spouse, or a depende | nt | | | | | | | |
| | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ <u>0.00</u> | _ | \$ 0.00 | _ | | | |
| 80 | Unemployment compensation | 8d. | \$ 0.00 | _ | \$ 0.00 | | | | |
| 86 | e. Social Security | 8e. | \$ 0.00 | - | \$_0.00 | _ | | | |
| 8f | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ce 8f. | \$_0.00 | _ | \$ 0.00 | | | | |
| 0. | | | \$ 0.00 | | \$ 0.00 | | | | |
| | g. Pension or retirement income | 8g. | | - | \ <u>.</u> | - | | | |
| 81 | n. Other monthly income. Specify: | 8h. | + \$ 0.00 | ξ, | + \$ 0.00 | - | | | |
| 9. A 0 | dd all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$_0.00 | | \$_0.00 | _ | _ | | |
| | culate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$ <u>4,594.24</u> | _]+ | \$ <u>508.00</u> | _ | = \$ | 5,102.24 | - |
| lno frie | ate all other regular contributions to the expenses that you list in Scheo lude contributions from an unmarried partner, members of your household, yends or relatives. | our c | lependents, your ro | | | | | | |
| | not include any amounts already included in lines 2-10 or amounts that are ecify: | | | ense | | <i>J</i> . 11, + | ⊢ | § 0.00 | - |
| | d the amount in the last column of line 10 to the amount in line 11. The ite that amount on the Summary of Your Assets and Liabilities and Certain S | | | | | 12. | Ľ | \$ 5,102.24 Combined | _ |
| | o you expect an increase or decrease within the year after you file this f | orm? | , | | | | n | nonthly income | |
| | Yes. Explain: | | | | | | | | |
| | | | | | | | | | 4 |

Addendum

Attachment 1

Description: Allstate Debtor's Amount: \$276.90 Spouse's Amount: \$0.00

Description: Insurance Serv Debtor's Amount: \$918.80 Spouse's Amount: \$0.00

Description: Pre-Tax AFLAC Debtor's Amount: \$0.00 Spouse's Amount: \$38.61

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| Fill | in this information to identify | your case; | | | | | |
|---|---|--|--|-------------------------|--|--|--|
| Debt | tor 1 Louis Charles Gutierre | | Check if this | is: | | | |
| Debi | First Name | 1111212 77-111- | | | • | | |
| (Spo | use, if filing) First Name | Middle Name Last Name | E . | _ | | etition chapter 13 | |
| Unite | ed States Bankruptcy Court for the: | Northern District of Illinois | | | | | |
| | e number 10wn) | | MM / DD / | YYYY | • | | |
| Off | icial Form 106J | - | | | | | |
| Sc | hedule J: Yo | ur Expenses | | | | 12/15 | |
| infor | s complete and accurate as pomation. If more space is need town). Answer every question | Seculiarization Check if this is: Icen Guillerez Check if this is: Icen Guill | | | | | |
| Pa | 1 1: Describe Your Ho | ousehold | | | | | |
| 1. Is | this a joint case? | | | | | | |
| | ☐ No. Go to line 2. ☑ Yes. Does Debtor 2 live in a | separate household? | | | | | |
| : | No ☐ Yes. Debtor 2 must | file Official Forms 106J-2, Expenses for | Separate Household of Debtor 2. | www. | and the second s | 4- | |
| 2. 🗅 | o you have dependents? | □ No | | | - | | |
| - | o not list Debtor 1 and Debtor 2. | | | 2 X//C | A CONTRACTOR OF THE PROPERTY O | | |
| | o not state the dependents' | | Daughter | . <u>13</u> | 3 | | |
| | lattics. | | | | | | |
| | | | | | | _ | |
| 1 | | | | | | | |
| | | | | | | ☐ No | |
| | | | | | | ☐ Yes | |
| : | | | | | | | |
| : | | - CANADA - ACADAMAN PROPERTY - | Lanne- | , | -, | : U Yes | |
| 6 | Do your expenses include expenses of people other than yourself and your dependents |) [] V | | | 1804 | | |
| : | 1 | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 | | | | | |
| Est exp | timate your expenses as of your expenses as of a date after the be | our bankruptcy filing date unless you a pankruptcy is filed. If this is a supplem | ental <i>Schedule J</i> , check the bo | ment in a x at the t | Chapter 13 op of the for | case to report m and fill in the | |
| Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form B 106I.) | | | | | Your expenses | | |
| 4. | The rental or home ownershi any rent for the ground or lot. | p expenses for your residence. Includ | e first mortgage payments and | 4. | \$ <u>1,191.99</u> | | |
| | If not included in line 4: | | | | | | |
| | 4a. Real estate taxes | | | 4a. | | | |
| : | 4b. Property, homeowner's, | or renter's insurance | | 4b. | | | |
| | 4c. Home maintenance, repa | ir, and upkeep expenses | | 4c. | | | |
| | 4d. Homeowner's association | n or condominium dues | | 4d. | \$ 0.00 | | |

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Debtor 1 Louis Charles Gutierrez Case number (# known) Case number (# known)

| | | Your expenses |
|---|------------|------------------|
| 5. Additional mortgage payments for your residence, such as home equity loans | 5. | \$_0.00 |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6. | \$ 200.00 |
| 6b. Water, sewer, garbage collection | 6a, 6b. | \$ 135.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ 365.00 |
| 6d. Other. Specify: | 6d. | \$ 0.00 |
| 7. Food and housekeeping supplies | 7. | \$ 800.00 |
| 8. Childcare and children's education costs | | \$ 0.00 |
| 9. Clothing, laundry, and dry cleaning | 8. 9. | \$ 100.00 |
| 10. Personal care products and services | 9. 10. | \$ 40.00 |
| 11. Medical and dental expenses | 10. | \$ 32.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. | 11. | Ψ |
| Do not include car payments. | 12. | \$ <u>460.00</u> |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ 100.00 |
| 14. Charitable contributions and religious donations | 14. | \$ 0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. | \$ 128.00 |
| 15b. Health insurance | 15b. | \$ 0.00 |
| 15c. Vehicle insurance | 15c, | \$ 150.00 |
| 15d. Other insurance. Specify: | 15d. | \$ 0.00 |
| 6. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | \$ 0.00 |
| 7. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 | 17a. | \$ 362.13 |
| 17b. Car payments for Vehicle 2 | 17b. | \$ 0.00 |
| 17c. Other. Specify: Village of Minooka Special Assessment | 17c. | \$ 114.00 |
| 17d. Other. Specify: | 17d. | \$ |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ 0.00 |
| 9. Other payments you make to support others who do not live with you. | | ¥ -/ |
| Specify: | 19. | \$ 0.00 |
| O. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incomp | | - |
| 20a. Mortgages on other property | 20a. | \$ <u>0.00</u> |
| 20b. Real estate taxes | 20b. | \$ 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | \$ 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ <u>0.00</u> |
| 20e. Homeowner's association or condominium dues | 20e. | \$ 0.00 |

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| Louis Charles Gutierrez Case number (if knot) First Name Middle Name Last Name | vn) | |
|--|---|--|
| | | |
| er. Specify: Timeshare dues and loan payment | 21. | +\$ 213.74 |
| Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 22. | \$ 4,491.86 \$ 4,491.86 |
| | 23a. | \$ <u>5,102.24</u> |
| Copy your monthly expenses from line 22 above. | 23b. | - \$ 4,491.86 |
| Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$ <u>610.38</u> |
| xample, do you expect to finish paying for your car loan within the year or do you expect your | | |
| 0. | | |
| Constitution of the Consti | | |
| e to | ner. Specify: Timeshare dues and loan payment culate your monthly expenses. Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. culate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. you expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your tagage payment to increase or decrease because of a modification to the terms of your mortgage? | ner. Specify: Timeshare dues and loan payment 21. Coulate your monthly expenses. Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. Add line 22a and 22b. The result is your monthly expenses. 22. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22 above. 23b. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. you expect an increase or decrease in your expenses within the year after you file this form? example, do you expect to finish paying for your car loan within the year or do you expect your tigage payment to increase or decrease because of a modification to the terms of your mortgage? |

| Debtor 1 | Louis | Charles | Gutierrez |
|---------------------|---------------------------|------------------|---------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | Sherry | Coleen | Gutierrez |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for the: | Northern Distric | t of Illinois |

☐ Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| 1. Schedule A/B: Property (Official Form 106A/B) | Your assets Value of what you own |
|--|------------------------------------|
| 1a. Copy line 55, Total real estate, from Schedule A/B | . <u>\$ 167,375.00</u> |
| 1b. Copy line 62, Total personal property, from Schedule A/B | . <u>\$ 26,164.70</u> |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ <u>193,539.70</u> |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ <u>168,527.41</u> |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | . \$ |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$ 28,276.08 |
| Your total liabilities | \$ <u>196,803.49</u> |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) | , 5 102 2 <i>4</i> |
| Copy your combined monthly income from line 12 of Schedule I | \$ <u>5,102.24</u> |
| 5. Schedule J: Your Expenses (Official Form 106J) | \$ <u>4,491.86</u> |

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| Deb | tor 1 LO | uis | Charles | Gutierrez | Case n | umber (ii known) | | - |
|-----------|------------------------|--|---|---|--|---------------------------------|--|------------------------|
| | | First Name I | Middle Name Last A | Vame | | | | |
| 25 | ini ana | | | | | | | |
| Pa | rt 4: / | Answer These | e Questions for Ad | ministrative and Statistic | al Records | | ······································ | |
| | Aro vou | filing for banks | ruptcy under Chapter | s 7 11 or 13? | | | | |
| ъ. | - | - | | | | t tt l the second the second | a ala a de Joo | |
| | | You have nothin | g to report on this part | of the form. Check this box and | submit this form | to the court with your other | schedules, | |
| | X Yes | | | | | | | neserota Si |
| 7. | What kir | nd of debt do ye | ou have? | 18 (14 A 14 | 1 2 3 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | | | |
| | X You | r debts are prin | narily consumer debt | s. Consumer debts are those "i | ncurred by an ind | lividual primarily for a persoi | nal, | |
| | famil | ly, or household | purpose." 11 U.S.C. § | 101(8). Fill out lines 8-10 for st | atistical purposes | . 28 U.S.C. § 159. | | |
| | ☐ You | r debts are not | primarily consumer | debts. You have nothing to repo | ort on this part of | the form. Check this box an | d submit | |
| | this 1 | form to the court | t with your other sched | ules. | | | | |
| LINEX.COT | ofte-engage-invokation | <u> 18 norman adalas ar especial de la comunicación d</u> | terreno-Westernanianianianianianianianianianianianiani | enda V Charles (see B. Laboure II Labour Green, et respect for de la laboure CLaboure (respective) et et la laboure | commencer eigh-sector science et er en exemple et en exemple et e | | entales de la companya de la companya de presentant de la companya de la companya de la companya de la company La companya de la co | alle allegation of the |
| 8. | From th | ne Statement of | Your Current Month | ly Income: Copy your total curre | ent monthly incon | ne from Official | _{\$} 7,968.63 | |
| | Form 12 | 22A-1 Line 11; O | R, Form 122B Line 11 | OR, Form 122C-1 Line 14. | | | \$ <u>1,300.00</u> | |
| | | | | | | i | | |
| | | 0.00 m (1.00 m) (1.00 m) (1.00 m) (1.00 m) (1.00 m) | VINEY YOUR TOTAL CONTINUES OF THE PROPERTY OF | en e | 0 v 44 c 20 million (1990 1997 1997 49 40 1997 1997 1997 1997 1997 1997 1997 199 | | ************************************** | |
| | | | | | | | | |
| 9. | Copy th | e following spe | cial categories of cla | nims from Part 4, line 6 of Sch | edule E/F: | | | |
| | | | | | | | | |
| | | | | | | Total claim | | |
| | _ | | state E/E committee for | It made an | | | | |
| | From | Part 4 on Sche | dule E/F, copy the fo | nowing; | | | | |
| | | | | - > | | | | |
| | 9a. Don | nestic support of | bligations (Copy line 6 | 3.) | | \$ 0.00 | | |
| | Ol T | | ther debte you our thr | government. (Copy line 6b.) | | | | |
| | 9D. Taxi | es and certain o | thet debts you owe the | government. (Copy in a ob.) | | \$0.00 | | |
| | 9c Clair | ms for death or | nersonal iniury while v | ou were intoxicated. (Copy line | 6c.) | . 0. 00 | | |
| | 00, 0.00 | | ,, | , , | | \$0.00 | | |
| | 9d Stud | dent loans. (Cop | ov line 6f.) | | | • 00 | | |
| | 04. 514. | | , | | | \$0.00 | | |
| | 9e. Obli | igations arising | out of a separation agr | eement or divorce that you did i | not report as | 0.00 | | |
| | prio | ority claims. (Cop | y line 6g.) | | | \$ <u>0.00</u> | | |
| | 9f. Deb | ots to pension or | profit-sharing plans, a | ınd other similar debts. (Copy lir | ne 6h.) | + \$0.00 | | |
| | ., | • | | | r | | 7 | |
| | 9a Tot | al. Add lines 9a | through 9f. | | | \$ 0.00 | | |
| | og. 100 | / , // // // // // // // // // // // // | | | _ | | J | |

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| Fill in this in | formation to identify y | our case: | | |
|---------------------------|--|-------------|------------------------|--|
| Debtor 1 | Louis Charles Gutierrez | : | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Sherry Coleen Gutierr | ez | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | Norther | n District Of Illinois | |
| Case number (If known) | | | | |
| (II KILOWII) | The state of the s | | Mild have to | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| Did you pay or agree to pay someone who is NOT an at ☑ No | ttorney to help you fill out bankruptcy forms? |
| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Under penalty of perjury, I declare that I have read the sthat they are true and correct. | summary and schedules filed with this declaration and |
| Louis Charles Gutierrez Signature of Debtor 1 | Sherry Coleen Gullerrez Signature of Debtor 2 |
| Date 10/04/2017 MM / DD / YYYY | Date 10/04/2017 MM / DD / YYYY |

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| Debtor 1 | Louis | Charles | Gutierrez |
|--------------------|---------------------------|-------------------------------|-----------|
| JODIOI I | First Name | Middle Name | Last Name |
| Debtor 2 | Sherry | Coleen | Gutierrez |
| Spause, if filing) | First Name | Middle Name | Last Name |
| Inited States I | Bankruptcy Court for the: | Northern District of Illinois | 3 |

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| What is your current marital status? | | | |
|---|---|---|---|
| ☑ Married☑ Not married | | | |
| During the last 3 years, have you lived anywher- | e other than where yo | u live now? | |
| No☐ Yes. List all of the places you lived in the last 3 | years. Do not include | where you live now. | |
| Debtor 1: | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 lived there |
| | | Same as Debtor 1 | Same as Debtor 1 |
| Number Street | From To | Number Street | From To |
| City State ZIP Code | | City State ZIP Cod | gregorianista — ko tamana (ili diligita) (ili manta tama) — mili tata (ili manta manta tama) — n. 1676 (ili man |
| | | ☐ Same as Debtor 1 | Same as Debtor 1 |
| Number Street | From To | Number Street | From To |
| City State ZIP Code | | City State ZIP | Code |
| Within the last 8 years, did you ever live with a and territories include Arizona, California, Idaho, I | spouse or legal equiv Louisiana, Nevada, Nev | valent in a community property state or tern w Mexico, Puerto Rico, Texas, Washington, a | itory? (Community property stat nd Wisconsin.) |
| ☑ No☑ Yes. Make sure you fill out Schedule H: Your | Cadablara (Official Ear | m 106H) | |

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| otor 1 Louis First Nam | S Charles Gutierrez. ne Middle Name Last | Name | Case n | umber (if known) | |
|--|--|---|--|---|---|
| | | | | | |
| art 2: Explain | n the Sources of Your Inc | ome | | | |
| Fill in the total a | any income from employmen amount of income you received a joint case and you have inco | i from all jobs and all busir | nesses, including part-tir | me activities. | dar years? |
| | | Debfor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions an exclusions) |
| | uary 1 of current year until you filed for bankruptcy: | Wages, commissions, bonuses, tipsOperating a business | \$ 63,250.00 | Wages, commissions, bonuses, tips □ Operating a business | \$ <u>5,894.72</u> |
| | alendar year: 1 to December 31, 2016 YYYY | Wages, commissions, bonuses, tips☐ Operating a business | \$ 70,781.00 | Wages, commissions, bonuses, tips ○ Operating a business | \$ 9,076.00 |
| | alendar year before that: (to December 31, 2015) | Wages, commissions, bonuses, tips Operating a business □ | \$ <u>73,439.00</u> | | \$ <u>4,082.00</u> |
| Did you receive Include income and other public | re any other income during the regardless of whether that inco | is year or the two previo ome is taxable. Examples rental income; interest; div | of <i>other income</i> are alimidends; money collected | from lawsuits; royalties; an | ecurity, unemploymer |
| Did you received Include income and other public winnings. If you List each source | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from e | is year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece | of other income are alim idends; money collected vived together, list it only | l from lawsuits; royalties; an / once under Debtor 1. | ecurity, unemploymen |
| Did you receive Include income and other public winnings. If you List each source | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from e | is year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece | of other income are alim idends; money collected vived together, list it only | l from lawsuits; royalties; an / once under Debtor 1. | ecurity, unemploymen d gambling and lottery |
| Did you receive nolude income and other public vinnings. If you list each source | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from e | is year or the two previo ome is taxable. Examples rental income; interest; div have income that you rece ach source separately. Do | of other income are alim idends; money collected vived together, list it only | d from lawsuits; royalties; and nonce under Debtor 1. It you listed in line 4. | d gambling and lottery Gross Income from each source |
| Did you received not be incomed in the public vinnings. If you ist each sourced No Yes. Fill in the From Jane | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from ethe details. | is year or the two previous ome is taxable. Examples rental income; interest; divided have income that you receath source separately. Do Debtor 1 | of other income are alimidends; money collected ived together, list it only not include income that Gross income from each source (before deductions and | d from lawsuits; royalties; and once under Debtor 1. it you listed in line 4. Debtor 2 Sources of income Describe below. | d gambling and lottery Gross income from each source (before deductions and |
| Did you received not be incomed and other public vinnings. If you list each sourced No Yes. Fill in the From Jane | re any other income during the regardless of whether that incide benefit payments; pensions; to are filing a joint case and you be and the gross income from eather details. | is year or the two previous ome is taxable. Examples rental income; interest; divided have income that you receath source separately. Do Debtor 1 | of other income are alimidends; money collected ived together, list it only not include income that Gross income from each source (before deductions and exclusions) | d from lawsuits; royalties; and once under Debtor 1. it you listed in line 4. Debtor 2 Sources of income Describe below. | d gambling and lottery Gross Income from each source (before deductions and exclusions) |
| Did you received not be incomed and other public vinnings. If you list each sourced No Yes. Fill in the From Jane | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from ethe details. | is year or the two previous ome is taxable. Examples rental income; interest; divided have income that you receath source separately. Do Debtor 1 | of other income are alimidends; money collected ived together, list it only not include income that Gross income from each source (before deductions and exclusions) | d from lawsuits; royalties; and once under Debtor 1. it you listed in line 4. Debtor 2 Sources of income Describe below. | d gambling and lottery Gross Income from each source (before deductions and exclusions) |
| Did you receive notude income and other public vinnings. If you ist each source. No Yes. Fill in the fill the date y | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from eather details. The details are the details are the details are filing a joint case and you see and the gross income from eather details. | is year or the two previous me is taxable. Examples rental income; interest; divided have income that you receated as a source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimidends; money collected idends; money collected elived together, fist it only not include income that Gross income from each source (before deductions and exclusions) \$ | d from lawsuits; royalties; and once under Debtor 1. t you listed in line 4. Debtor 2: Sources of income Describe below. | Gross income from each source (before deductions and exclusions) \$ |
| Did you received include income and other public winnings. If you list each source I No Yes. Fill in the date y | re any other income during the regardless of whether that incide benefit payments; pensions; are filing a joint case and you be and the gross income from eather details. | is year or the two previous me is taxable. Examples rental income; interest; divided have income that you receated as a source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimidends; money collected idends; money collected ived together, list it only not include income that Gross income from each source (before deductions and exclusions) \$ | d from lawsuits; royalties; and once under Debtor 1. it you listed in line 4. Debtor 2 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) \$ |
| Did you received include income and other public winnings. If you have a considered in the constant of the con | re any other income during the regardless of whether that income benefit payments; pensions; are filing a joint case and you see and the gross income from each the details. The details are filing a joint case and you see and the gross income from each the details. | is year or the two previous ome is taxable. Examples rental income; interest; divided have income that you receated ach source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimidends; money collected idends; money collected ived together, list it only not include income that Gross income from each source (before deductions and exclusions) \$ | d from lawsuits; royalties; and once under Debtor 1. It you listed in line 4. Debtor 2: Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) \$ |
| Did you receive Include income and other public winnings. If you List each source No Yes. Fill in the From January 1 For last ca (January 1 | re any other income during the regardless of whether that incide benefit payments; pensions; are filing a joint case and you be and the gross income from each the details. The details income from t | is year or the two previous ome is taxable. Examples rental income; interest; divided have income that you receated ach source separately. Do Debtor 1 Sources of income Describe below. | of other income are alimidends; money collected idends; money collected ived together, fist it only not include income that Gross income from each source (before deductions and exclusions) \$ | d from lawsuits; royalties; and once under Debtor 1. It you listed in line 4. Debtor 2: Sources of income Describe below. | Gross Income from each source (before deductions and exclusions) \$ |

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Louis Charles Gutierrez Case number (if known)_ Debtor 1 Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes, List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. 🗵 Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment for... Amount you still owe Dates of Total amount paid payment ■ Mortgage Creditor's Name Car ☐ Credit card Number Street Loan repayment Suppliers or vendors Other ZIP Code State ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other ____ State ZIP Code ☐ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other ____ City State ZIP Code

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Louis Charles Gutierrez

Debtor 1

| otor 1 Louis Charles Gutierrez First Name Middle Name Last Na | me | • | Case number (if known) |) |
|--|--|--|--|--|
| | | | | |
| Within 1 year before you filed for bankruptcy <i>Insiders</i> include your relatives; any general part corporations of which you are an officer, direct agent, including one for a business you operate such as child support and alimony. | iners; relatives of any or, person in control, or | general partners; p r owner of 20% or i | eartnerships of whic more of their voting | h you are a general partner; securities; and any managing |
| ☐ No | | | | |
| Yes. List all payments to an insider. | | | | |
| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| Irene Mahoney Insider's Name | 03/01/17 | \$ <u>7,000.00</u> | \$ 3,000.00 | THE PARTY OF THE P |
| 9410 Mevina Ave #25W Number Street | | | | |
| Oak Lawn IL 6043 City State ZIP Co | | | | |
| Insider's Name | | \$ | . \$ | |
| | | | | |
| Number Street | | | | |
| | | | | |
| City State ZIP Co | de | | | |
| Nithin 1 year before you filed for bankruptcy, an insider? Include payments on debts guaranteed or cosigu No → Yes. List all payments that benefited an insid | ned by an insider. | ayments or transf | er any property on | account of a debt that benefited |
| | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| Insider's Name | | \$ | _ \$ | |
| Number Street | | | | |
| City State ZIP Coo | de . | | TO THE PARTY OF TH | |
| - Annual Control of the Part of the Part of the Control of the Con | The second section is a second | \$ | \$ | |
| Insider's Name | | | | |
| Number Street | | | TOTAL MATERIAL PROCESSION OF THE PROCESSION OF T | |
| | <u> </u> | | of a control of the c | |
| City State ZIP Cod | | | narry variation | |

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Case number (if known)_

Louis Charles Gutierrez

Debtor 1

| ithin 1 year before you filed for ba st all such matters, including person ad contract disputes. | inkruptcy, were al injury cases, s | you a party in any laws small claims actions, divo | suit, court action, or adminis prces, collection suits, paternit | strative proceed y actions, suppo | ling? rt or custody modification |
|---|---------------------------------------|--|---|--------------------------------------|--|
| No | | | | | |
| Yes. Fill in the details. | | | | | |
| | Nature | e of the case | Court or agency | | Status of the case |
| | | | | | Pending |
| Case title | | | Court Name | | On appeal |
| | | | | | Concluded |
| | | | Number Street | | Consider |
| Case number | | | City State | ZIP Code | |
| | | | 1 . | | and the second s |
| | | | | | Pending |
| Case title | | | Court Name | | On appeal |
| | | | | | Concluded |
| | | | Number Street | | Concluded |
| Case number | | | City State | ZIP Code | <u></u> |
| ithin 1 year before you filed for ba heck all that apply and fill in the deta I No. Go to line 11. I Yes. Fill in the information below. | | any of your property re | possessed, foreclosed, gar | nished, attache | d, seized, or levied? |
| heck all that apply and fill in the deta | | any of your property re Describe the property | | nished, attache | d, seized, or levied? Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. | | | | | |
| heck all that apply and fill in the deta | | | | | Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name | | Describe the property | , | | Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. | | Describe the property Explain what happens | , ed | | Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name | | Describe the property Explain what happene | ed epossessed. | | Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name | | Describe the property Explain what happened Property was re | epossessed. Preclosed. | | Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name | ails below. | Explain what happened Property was for Property was go | epossessed. Preclosed. | | Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | ails below. | Explain what happened Property was for Property was go | ed epossessed. oreclosed. arnished. ttached, seized, or levied. | | Value of the property |
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| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | ails below. | Describe the property Explain what happene Property was re Property was fo | ed epossessed. oreclosed. arnished. ttached, seized, or levied. | Date | Value of the property \$ Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street | ails below. | Describe the property Explain what happene Property was re Property was fo | ed epossessed. oreclosed. arnished. ttached, seized, or levied. | Date | Value of the property \$ Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta | ails below. | Describe the property Explain what happene Property was re Property was fo | ed epossessed. oreclosed. arnished. ttached, seized, or levied. | Date | Value of the property \$ Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta | ails below. | Describe the property Explain what happene Property was re Property was fo | ed epossessed. preclosed. arnished. ttached, seized, or levied. | Date | Value of the property \$ Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta | ails below. | Describe the property Explain what happene Property was re Property was go Property was al Describe the property Explain what happene | ed epossessed. preclosed. arnished. ttached, seized, or levied. | Date | Value of the property \$ Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta | ails below. | Describe the property Explain what happene Property was re Property was go Property was all Describe the property Explain what happene | ed epossessed. preclosed. arnished. ttached, seized, or levied. | Date | Value of the property \$ Value of the property |
| heck all that apply and fill in the deta No. Go to line 11. Yes. Fill in the information below. Creditor's Name Number Street City Sta | ails below. | Describe the property Explain what happene Property was re Property was go Property was al Describe the property Explain what happene | ed epossessed. preclosed. arnished. ttached, seized, or levied. ded epossessed. preclosed. | Date | Value of the property \$ Value of the property |

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| 1 Louis Charles Gutierrez | | Case i | number (if known) | |
|--|--------------------|--|--|-----------------|
| First Name Middle Name | Last Name | | | |
| | | | | |
| | | , did any creditor, including a bank or final | ncial institution, set off any am | ounts from your |
| ccounts or refuse to make a pa | ayment because | e you owed a debt? | | |
| ☑ No ☑ Yes. Fill in the details. | | | | |
| Tes. Fill in the details. | | | | |
| | | Describe the action the creditor took | Date action was taken | Amount |
| Creditor's Name | | | | |
| | | | | \$ |
| Number Street | | | | Υ |
| | | | 3 3 7 | |
| | \ | The state of the s | | |
| City State | ZIP Code L | .ast 4 digits of account number: XXXX | | |
| Nithin A was a bafana was filad fas | - L | | | - |
| reditors, a court-appointed rece | | was any of your property in the possession lian, or another official? | n of an assignee for the benefit | OT |
| ☑ No | | | | |
| ☐ Yes | | | | |
| | | | | |
| 5: List Certain Gifts and | Contribution | 15 | | |
| | or bankruptcy, | did you give any gifts with a total value of | more than \$600 per person? | |
| No Yes. Fill in the details for each Gifts with a total value of more | gift. | did you give any gifts with a total value of | Dates you gave | Value |
| No Yes. Fill in the details for each | gift. | | | Value |
| No Yes. Fill in the details for each Gifts with a total value of more | gift. | | Dates you gave | Value |
| No Yes. Fill in the details for each Gifts with a total value of more | gift. | | Dates you gave | Value \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift | gift. | | Dates you gave | Value \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person | gift. | | Dates you gave | \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift | gift. | | Dates you gave | \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street | gift. | | Dates you gave | \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street | gift. | | Dates you gave | \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street | gift. | | Dates you gave | \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State | gift. than \$600 D | | Dates you gave the gifts Dates you gave | \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the per person | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the per person | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the per person Person to Whom You Gave the Gift | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the per person Person to Whom You Gave the Gift | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the per person Person to Whom You Gave the Gift Number Street | ZIP Code | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |
| No Yes. Fill in the details for each Gifts with a total value of more per person Person to Whom You Gave the Gift Number Street City State Person's relationship to you Gifts with a total value of more the per person Person to Whom You Gave the Gift Number Street | gift. than \$600 D | Describe the gifts | Dates you gave the gifts Dates you gave | \$ \$ |

Debtor 1

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| Louis Charles Gutierrez | Case number (if known) | | |
|--|--|--|--|
| First Name Middle Name Last | Name | | |
| | | | |
| | | - f w- 4b o- \$600 f | o ony obssitu? |
| in 2 years before you filed for bankrup | etcy, did you give any gifts or contributions with a total value | of more than \$600 i | O any charity? |
| No | | | |
| res. Fill in the details for each gift or con | tribution. | | |
| | | Data | Value |
| | Describe what you contributed | contributed | value |
| that total more than \$400 | | Ī | |
| | | | |
| | | | \$ |
| Charity's Name | | | |
| | | | \$ |
| Number Street | | | |
| | | | |
| | | golden de la companya | |
| | | | |
| 200 | | - | |
| City State ZIP Code | ALL STATE OF THE S | J | |
| | | | |
| | | | |
| List Certain Losses | | | |
| Describe the property you lost and how | Describe any insurance coverage for the loss | Date of your loss | Value of property |
| | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | | |
| | A STATE OF THE PROPERTY OF THE | | • |
| | | | \$ |
| | | | |
| | | | Accession of the Control of the Cont |
| List Certain Payments or Trai | nsfers | | |
| | to did you or anyone electrical on your behalf hav or tran- | sfer any property to | anvone vou |
| hin 1 year before you filed for bankrup soulted about socking bankruptcy or n | reparing a hankruptev petition? | oioi any proporty to | *, , |
| ude any attorneys, bankruptcy petition p | reparers, or credit counseling agencies for services required in yo | our bankruptcy. | |
| · | | | |
| | | | |
| Yes. Fill in the details. | | | |
| | Description and value of any property transferred | Date payment or | Amount of paymen |
| 001 Debtorcc, Inc. | The second of th | transier was made | |
| Person Who Was Paid | | NAME OF TAXABLE PARTY. | |
| | | 09/20/17 | \$ <u>15.00</u> |
| Number Street | Topic de la constant | - | |
| | *************************************** | Code Carried To | \$ |
| | | | * |
| Cibr State 7ID Code | | | |
| Ony State ZiP Code | | Parameter (Prince) | |
| www.debtorcc.org | | | |
| Email of website 200fess | | 2 | |
| <u></u> | | | |
| | in 2 years before you filed for bankrup No Yes. Fill in the details for each gift or con- Gifts or contributions to charitles that total more than \$600 Charity's Name Number Street List Certain Losses nin 1 year before you filed for bankrup nambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Train hin 1 year before you filed for bankrup sulted about seeking bankruptcy or p ude any attorneys, bankruptcy petition p No Yes. Fill in the details. 001 Debtorcc, Inc. Person Who Was Paid Number Street City State ZIP Code | in 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of res. Fill in the details for each gift or contribution. Gifts or contributions to charitles that total more than \$500 Describe what you contributed that total more than \$500 List Certain Losses In 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything be ambiling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred in your define the property you lost and how along the loss occurred include the amount that insurance has paid. List pending insurance delains on line 33 of Schedule AAS. Property. List Certain Payments or Transfers In 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transuited about seeking bankruptcy or preparing a bankruptcy petition? ude any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your yes. Fill in the details. Description and value of any property transferred OUT Debtoroc, Inc. Person Who Was Pad Teumber Street Description and value of any property transferred OUT Debtoroc, Inc. Description and value of any property transferred | In 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to No. Solver, Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Date you contributed Date you con |

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| | Louis Charles Gutierrez First Name Middle Name Last Name Case number (# known) | | | | | |
|--|---|--|--|--|---------------------------|--|
| PMYs | РРП учения так выполня на выполня на применения выполня на применения на применения на применения на применени | Description and value of any property to | | Date payment or transfer was made | Amount of payment | |
| | Malinguist, Geogrand | 2 Durker, CLC | 1 | , / | | |
| i | 415 Washington Street | \$310 Filingfee | | 10/4/17 | \$ \$310 | |
| ^ | City State ZIP Code | | | | \$ | |
| Ī | Email or website address | - | | | | |
| Ī | Person Who Made the Payment, if Not You | | | | | |
| ⊠ N □ Υ | o es. Fill in the detaits. | Description and value of any areas + - | anefored | Data naversati | Amazust of | |
| | | Description and value of any property tr | | Date payment or transfer was made | Amount of paymer | |
| i | Person Who Was Paid | | | | | |
| | | | 3 | | \$ | |
| i | Number Street | | | | \$ | |
| | Number Street | | | | \$ | |
| | City State ZIP Code | | | | \$ | |
| Within transinclud | City State ZIP Code 1 2 years before you filed for bankrup ferred in the ordinary course of your k e both outright transfers and transfers m t include gifts and transfers that you hav | nade as security (such as the granting of | | | | |
| Within trans: Included Do no | City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your be e both outright transfers and transfers m t include gifts and transfers that you hav bes. Fill in the details. | pusiness or financial affairs? nade as security (such as the granting of re already listed on this statement. Description and value of property | a security interest or mor Describe any property or | tgage on your prop | erty). Date transfer | |
| Within trans: Included Do no | City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your k e both outright transfers and transfers m t include gifts and transfers that you hav | pusiness or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred Money loaned from Bridgeview Bank (now transfered to the Money Source) | a security interest or mor | tgage on your prop payments received e | Date transfer was made | |
| Within rans notud | City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your k e both outright transfers and transfers m t include gifts and transfers that you hav bes. Fill in the details. John Thompson | pusiness or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred Money loaned from Bridgeview Bank | a security interest or mor Describe any property or or debts paid in exchang | tgage on your prop payments received e | erty). Date transfer | |
| Within rans: | City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your k e both outright transfers and transfers m t include gifts and transfers that you hav bes. Fill in the details. John Thompson erson Who Received Transfer | pusiness or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred Money loaned from Bridgeview Bank (now transfered to the Money Source) in the approximate amount of \$145k, | a security interest or mor Describe any property or or debts paid in exchang | tgage on your prop payments received e | Date transfer was made | |
| Within trans: Note: The control of | City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your k e both outright transfers and transfers m t include gifts and transfers that you hav bes. Fill in the details. John Thompson Terson Who Received Transfer | pusiness or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred Money loaned from Bridgeview Bank (now transfered to the Money Source) in the approximate amount of \$145k, | a security interest or mor Describe any property or or debts paid in exchang | tgage on your prop payments received e | Date transfer was made | |
| Within Prans Property | City State ZIP Code n 2 years before you filed for bankrup ferred in the ordinary course of your k te both outright transfers and transfers m t include gifts and transfers that you hav bes. Fill in the details. John Thompson Terson Who Received Transfer | pusiness or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred Money loaned from Bridgeview Bank (now transfered to the Money Source) in the approximate amount of \$145k, | a security interest or mor Describe any property or or debts paid in exchang | tgage on your prop payments received e | Date transfer was made | |
| Within trans: | City State ZIP Code In 2 years before you filed for bankrup ferred in the ordinary course of your k e both outright transfers and transfers in t include gifts and transfers that you hav bes. Fill in the details. John Thompson Ferson Who Received Transfer John Street State ZIP Code Terson's relationship to you See 1 | pusiness or financial affairs? nade as security (such as the granting of the already listed on this statement. Description and value of property transferred Money loaned from Bridgeview Bank (now transfered to the Money Source) in the approximate amount of \$145k, | a security interest or mor Describe any property or or debts paid in exchang | tgage on your prop payments received e | Date transfer was made | |

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| ог 1 | Louis Charles | | | | Case | number (if kno | 20) | |
|----------------|--|--------------|----------------|---|----------------|----------------|---------------------------|--|
| | First Name | Middle Name | Last No | ame | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Withir | n 10 years before | a you filed | for bankrup | tcy, did you transfer any property | / to a self-s | ettled trust | or similar device of whi | ich you |
| are a | beneficiary? (Th | lese are of | ten called ass | set-protection devices.) | | | | |
| ×Ν | 0 | | | | | | | |
| | es. Fill in the deta | iis. | | | | | | |
| | | | | | | | | |
| | | | | Description and value of the prope | rty transferre | ed | | Date transfer was made |
| | | | | | | | | |
| | | | | | | | | |
| N | ame of trust | | | | | | | |
| | | | | | | | | |
| _ | | | | | | | | |
| | | | | \$ | | | | |
| | The second secon | | | | | | 11.24. | |
| and the second | | | | Instruments, Safe Deposit I | | | | |
| . Withi | in 1 vear before | you filed fe | or bankruptc | y, were any financial accounts o | r instrumer | nts held in y | our name, or for your b | enefit, |
| close | ed, sold, moved. | or transfe | erred? | | | | | |
| Inclu | ide checking, sa | vings, moi | ney market, d | or other financial accounts; certi | ficates of d | eposit; sha | res in banks, credit unic | ons, |
| brok | erage houses, p | ension fur | nds, coopera | tives, associations, and other fin | ancial insti | itutions. | | |
| ⊠ N | ło | | | | | | | |
| □ Y | es, Fill in the de | tails. | | | | | | |
| | | | | Last 4 digits of account number | Type of a | ccount or | Date account was | Last balance befor |
| | | | | Edot 4 digito of Rooming | instrumer | | closed, sold, moved, | closing or transfer |
| | | | | | | | or transferred | |
| | Name of Financial Ins | etitution | | | п. | _ | | |
| | Manie of Litational ma | ititation | | xxxx | Check | = | | \$ |
| | Number Street | | | | Savin | gs | | |
| | (Tallibo) Otloat | | | | ☐ Mone | y market | | |
| | | | - | | ☐ Broke | rage | | |
| | City | State | ZIP Code | | Other | | | |
| | | | Z., 5000 | | - Culer | | | |
| | | | | | | | | • |
| | Name of Financial In | stitution | | xxxx | Checi | _ | | \$ |
| | Hame of Financial III | Judion | | | 🔲 Savin | gs | | |
| | Number Street | | | | ☐ Mone | y market | | |
| | Halliber Street | | | | ☐ Broke | erage | | |
| | | | | | Other | | | |
| | City | State | ZIP Code | | - Cale | | | |
| | • | | | | | | | _ |
| 1. Do y | ou now have, or | did you h | ave within 1 | year before you filed for bankrup | itcy, any sa | ife deposit i | box or other depository | for |
| | urities, cash, or o | other valua | ables? | | | | | |
| X 1 | | | | | | | | |
| L | Yes. Fill in the de | rtails. | | | | | | D |
| | | | | Who else had access to it? | | Describe t | he contents | Do you sti have it? |
| | | | | | | | | |
| | | | | | | | | □ No |
| | Name of Financial In | stitution | | Name | | 2 | | ☐ Yes |
| | | | | ** | | *** | | - La . La company |
| | Number Street | | | Number Street | | - | | - Landerson |
| | | | | ======================================= | | | | Anna Paris de La Carte de Cart |
| | | | -,,, | City State ZIP Code | | | | * |
| | Cit. | Chat- | ZIP Code | | | | | I. |
| | City | State | AIT COUR | | | L | | <i></i> |

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| ebtor 1 | Louis Charles Gutierrez | | Case number (if known) | |
|--|--|---|--|---|
| | First Name Middle Name (| ast Name | | |
| | | | | |
| . Hav | e you stored property in a storage uni | t or place other than your home within | 1 year before you filed for bankruptcy? | ? |
| | Yes. Fill in the details. | | | |
| | . ooi i m m me doddio. | Who else has or had access to it? | Describe the contents | Do you ofil |
| | | ייים פוסט אונים פו אונים מסטים פוסט פוסט פוסטים | Describe the contents | Do you stil have it? |
| | | | | n. |
| | Name of Storage Facility | Name | | □ No □ Yes |
| | | | THE STATE OF THE S | 163 |
| | Number Street | Number Street | | *************************************** |
| | | | | |
| | | CityState ZIP Code | | |
| | City State ZIP Code | | A Paris Armana Par | |
| | | | | 2000 - 200 |
| art 9 | Identify Property You Hold | or Control for Someone Else | | |
| J. Do | you hold or control any property that | someone else owns? Include any prop | erty you borrowed from, are storing to | r |
| or I | nold in trust for someone. | , , , , , , , , , , , , , , , , , , , | or of the second | ', |
| | | | | |
| Ц | Yes. Fill in the details. | | | |
| | | Where is the property? | Describe the property | Value |
| | | | | |
| | | • | | \$ |
| | Owner's Name | | | |
| | Owner's Name | Number Street | | |
| | Number Street | . Number Street | | |
| | | Number Street | | |
| | Number Street | Number Street City State ZIP Co | de | |
| | Number Street City State ZIP Code | . City State ZIP Co | de | TOWN CALL AND ADMINISTRA |
| art 1 | Number Street City State ZIP Code | . City State ZIP Co | de | CONTRACT AND ASSESSMENT |
| | Number Street City State ZIP Code O: Give Details About Environ | . City State ZIP Co mental Information | de | |
| or the | Number Street City State ZIP Code City Details About Environ purpose of Part 10, the following details | . City State ZIP Co mental Information finitions apply: | | |
| or the <i>En</i> v | O: Give Details About Environ purpose of Part 10, the following details arrows any federal, stardous or toxic substances, wastes, | city State ZIP Comental Information finitions apply: ate, or local statute or regulation conce | erning pollution, contamination, releas. | es of |
| or the <i>En</i> v | O: Give Details About Environ purpose of Part 10, the following details arrows any federal, stardous or toxic substances, wastes, | . City State ZIP Co mental Information finitions apply: | erning pollution, contamination, releas. | es of m, |
| Env haz incl | O: Give Details About Environ purpose of Part 10, the following details ardous or toxic substances, wastes, uding statutes or regulations controls means any location, facility, or proper | mental Information finitions apply: ate, or local statute or regulation conce or material into the air, land, soil, surface ling the cleanup of these substances, we | erning pollution, contamination, release ce water, groundwater, or other mediu vastes, or material. | m, |
| Env haz incl | Number Street City State ZIP Code O: Give Details About Environ e purpose of Part 10, the following detail or incommental law means any federal, stardous or toxic substances, wastes, uding statutes or regulations control | mental Information finitions apply: ate, or local statute or regulation conce or material into the air, land, soil, surface ling the cleanup of these substances, we | erning pollution, contamination, release ce water, groundwater, or other mediu vastes, or material. | m, |
| Env haz incl Site it or | O: Give Details About Environ purpose of Part 10, the following details ardous or toxic substances, wastes, uding statutes or regulations controls means any location, facility, or proper used to own, operate, or utilize it, incardous material means anything an exardous controls and the means anything and the material means anything and the means anything anything anything anything anything anyth | mental Information finitions apply: ate, or local statute or regulation conce or material into the air, land, soil, surfact ling the cleanup of these substances, we entry as defined under any environmenta cluding disposal sites. | erning pollution, contamination, release ce water, groundwater, or other mediu vastes, or material. Il law, whether you now own, operate, | m, |
| Env haz incl Site it or | O: Give Details About Environ purpose of Part 10, the following details ardous or toxic substances, wastes, uding statutes or regulations controls means any location, facility, or proper used to own, operate, or utilize it, income | mental Information finitions apply: ate, or local statute or regulation conce or material into the air, land, soil, surfact ling the cleanup of these substances, we entry as defined under any environmenta cluding disposal sites. | erning pollution, contamination, release ce water, groundwater, or other mediu vastes, or material. Il law, whether you now own, operate, | m, |
| Env haz incl Site it or Haz sub | O: Give Details About Environ e purpose of Part 10, the following details ardous or toxic substances, wastes, uding statutes or regulations controlle means any location, facility, or proper used to own, operate, or utilize it, incardous material means anything an estance, hazardous material, pollutant | mental Information finitions apply: ate, or local statute or regulation conce or material into the air, land, soil, surfact ling the cleanup of these substances, we entry as defined under any environmenta cluding disposal sites. | erning pollution, contamination, release ce water, groundwater, or other mediu vastes, or material. Il law, whether you now own, operate, us waste, hazardous substance, toxic | m, |
| Env haz incl Site it or Haz sub | O: Give Details About Environ purpose of Part 10, the following details ardous or toxic substances, wastes, uding statutes or regulations controlled the means any location, facility, or proper used to own, operate, or utilize it, including ardous material means anything an estance, hazardous material, pollutant all notices, releases, and proceeding | mental Information finitions apply: ate, or local statute or regulation conce or material into the air, land, soil, surface ling the cleanup of these substances, we certy as defined under any environmental cluding disposal sites. nvironmental law defines as a hazardor contaminant, or similar term. s that you know about, regardless of we | erning pollution, contamination, release ce water, groundwater, or other mediu vastes, or material. Il law, whether you now own, operate, us waste, hazardous substance, toxic then they occurred. | m, or utilize |
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| ave | you notified any governmental unit o | f any release of hazardous m | aterial? | | |
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| | no ⁄es. Fill in the details. | | | | |
| | es. I ili ili die details. | Governmental unit | Environmental law | , if you know it | Date of notice |
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| | | | | | |
| | Name of site | Governmental unit | | | |
| | Number Street | Number Street | | | |
| | Months Street | Humber Greece | | | |
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| | City State ZIP Code | | | | and a real contract of the second contract of |
| lav∈ | you been a party in any judicial or ad | lministrative proceeding unde | er any environmental law | v? Include settlements ar | id orders. |
| × | | | | | |
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| | | Court or agency | Nature of the | case | Case Case |
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| otor 1 | Louis Charles Gutierrez | Case numb | er (If known) |
|------------------------------|---|---|---|
| | First Name Middle Name | Last Name | . (3.7.0.0.7) |
| Rue | siness Name | Describe the nature of the business | Employer identification number Do not include Social Security number or ITIN. |
| Bus | siness Name | | EIN: |
| Nun | nber Street | Name of accountant or bookkeeper | Dates business existed |
| | | | FromTo |
| City | State ZIP Co | ode | 10 |
| Nithin 2 nstitutio | years before you filed for bar ons, creditors, or other partie | nkruptcy, did you give a financial statement to anyone al s. | pout your business? Include all financial |
| ⊠ No □ Yes. | Fill in the details below. | | |
| | | Date issued | |
| Nam | 18 | MM / DD / YYYY | |
| Num | ober Street | | |
| | | | |
| City | State ZIP Co | ode | |
| | | · | |
| | | | |
| t 12: | Sign Below | | |
| V | 0.9.2 20.011 | | |
| in conn | 's are true and correct. I unde | ement of Financial Affairs and any attachments, and I de erstand that making a false statement, concealing proper e can result in fines up to \$250,000, or imprisonment for 71. | ty, or obtaining money or property by fraud |
| And the second of the second | Louis At t | les dunin Ce | He tury |
| & Lou | uis Charles Gutierrez | Sherry Coleen Gutlerrez | 7 |
| Sign | ature of Debtor 1 | Signature of Debtor 2 | 9 |
| Date | 4 October 2017 | Date 4 October 2017 | |
| Did you | attach additional pages to Y | our Statement of Financial Affairs for Individuals Filing t | or Bankruptcy (Official Form 107)? |
| ☐ No ☐ Yes | S | | |
| | pay or agree to pay someone | who is not an attorney to help you fill out bankruptcy fo | orms? |
| ☑ No ☐ Yes. | Name of person | . Attac | h the Benkrustay Detition Described |
| 100, | | | h the Bankruptcy Petition Preparer's Notice, claration, and Signature (Official Form 119). |

Attachment
Debtor: Louis Charles Gutierrez Case No:

Attachment 1
Debtor's Uncle

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B2030 (Form 2030) (12/15)

In re Louis Charles Gutierrez and Sherry Coleen

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS

| | | Gutierrez | | Case No |
|-----|------------|--|--|--|
| Del | otor | | | Chapter 13 |
| | | DISCLOSUR | E OF COMPENSATION OF ATTO | ORNEY FOR DEBTOR |
| 1. | nan ban | ned debtor(s) and that com kruptcy, or agreed to be pa | pensation paid to me within one year | be rendered on behalf of the debtor(s) in |
| | For | · legal services, I have agre | eed to accept | \$4,000.00 |
| | Pric | or to the filing of this state | ment I have received | \$0.00 |
| | Bal | ance Due | | \$4,000.00 |
| 2. | The | e source of the compensation | on paid to me was: | |
| | | X Debtor | Other (specify) | |
| 3. | The | e source of compensation t | o be paid to me is: | |
| | | X Debtor | Other (specify) | |
| 4. | | I have not agreed to smembers and associates | share the above-disclosed compensation of my law firm. | on with any other person unless they are |
| | | I have agreed to shar members or associates of people sharing in the com | my law firm. A copy of the agreeme | with a other person or persons who are not nt, together with a list of the names of the |
| 5. | | return for the above-disclose, including: | sed fee, I have agreed to render legal | service for all aspects of the bankruptcy |
| | a. | Analysis of the debtor's stille a petition in bankrupt | | ice to the debtor in determining whether to |
| | b. | Preparation and filing of | any petition, schedules, statements of | f affairs and plan which may be required; |
| | c. | Representation of the deb hearings thereof; | otor at the meeting of creditors and co | onfirmation hearing, and any adjourned |

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| B2030 (Form 2030) (12/15) | B2030 | (Form | 2030) | (| 12/ | 15 |) |
|---------------------------|-------|-------|-------|---|-----|----|---|
|---------------------------|-------|-------|-------|---|-----|----|---|

| d. F | Lepresentation-of-the debtor-in-adversar | ry proceedings and oth | er-contested-banksuptcy-matters;- |
|------|--|------------------------|-----------------------------------|
|------|--|------------------------|-----------------------------------|

e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 4, 2017

/s/ James M. Durkee

Date

Signature of Attorney

Malmquist, Geiger and Durkee, LLC

Name of law firm

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Capital One 15000 Capital One Dr. Richmond, VA 23238

CBNA P.O. Box 6189 Sioux Falls, SD 57117

Chase Auto Finance P.O. Box 9001083 Louisville, KY 40290-1083

Credit One Bank P.O. Box 98875 Las Vegas, NV 89193

Heights Finance Corp 1145 Essington Rd. Joliet, IL 60435

Kohl's/Capital One N56 W 17000 Ridgewood Dr. Menomonee Falls, WI 53051

Merrick Bank Corp P.O. Box 9201 Old Bethpage, NY 11804

Monera Financial 3313 S. Arlington Ave. Indianapolis, IN 46203

Silver Cross Hospital 7008 Solution Center Chicago, IL 60677-7000

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SYNCB Home P.O. Box 965036 Orlando, FL 32896

SYNCB/Care Credit 950 Forrer Blvd. Kettering, OH 45420

SYNCB/JCP P.O. Box 965007 Orlando, FL 32896

SYNCB/Lowes P.O. Box 965005 Orlando, FL 32896

The Money Source 500 South Broad St., Suite 100A Meriden, CT 06450 Case 17-29970 Doc 1 Filed 10/05/17 Entered 10/05/17 22:44:48 Desc Main Document Page 58 of 58

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

| In Re: | | Bankruptcy Case Number: |
|---------|---|--|
| | Louis Charles Gutierrez Coleen Gutierrez | z and Sherry |
| | | VERIFICATION OF CREDITOR MATRIX |
| | | Number of Creditors: |
| The abo | | erifies that the list of creditors is true and correct to the best of my (our) |
| Dated: | October 4, 2017 | Louis Charles Gutierrez |
| Duico. | October 4, 2017 | OI Debtor |
| | | Sherry College Gutierrez |
| | | Joint Debtor |